

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P98000010878

1. Entity Name
DURABLE MATERIALS, INC.



FILED
Jan 30, 2004 08:00 AM
Secretary of State

Principal Place of Business
4905 34TH ST. S., #346
ST. PETERSBURG, FL 33711

Mailing Address
4905 34TH ST. S., #346
ST. PETERSBURG, FL 33711



01132004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3490498
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

5. Name and Address of Current Registered Agent

SOTNICK, ALFRED
5281 ISLA KEY BLVD. S., SUITE 306
ST. PETERSBURG, FL 33715

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

U000000021458
01/30/04-80005-017 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOTNICK, ALFRED 5281 ISLA KEY BLVD. S., #306 ST. PETERSBURG, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Alfred Sotnick* ALFRED SOTNICK 01-27-04 (227) 867 9426
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #