

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90203 036 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																																																																																																																																					
DOCUMENT # P98000022442 1. Corporation Name MICRO POLISH SYSTEMS, INC.																																																																																																																																									
Principal Place of Business 1479 UNIT C GREENWOOD AVENUE SOUTH CLEARWATER FL 33755			Mailing Address 1479 UNIT C GREENWOOD AVENUE SOUTH CLEARWATER FL 33755																																																																																																																																						
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 03/15/1998 4. FEI Number 59-3496956 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No																																																																																																																																					
9. Name and Address of Current Registered Agent CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BOULEVARD #211 PALM BEACH GARDENS FL 33418			10. Name and Address of New Registered Agent 81 Name Allan F. Sindell 82 Street Address (P.O. Box Number is Not Acceptable) 1521 Dexter Drive 83 84 City Clearwater FL 85 Zip Code 33756																																																																																																																																						
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Allan F. Sindell Allan F. Sindell 28 APR 99 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required with new filing.)																																																																																																																																									
12. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>D</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>GRUBELIC, NO</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1479 UNIT C</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER FL 33755</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>☐ DELETE</td> </tr> <tr> <td>NAME</td> <td>SINDELL, ERIC A</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1479 UNIT C</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER FL 33755</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>☐ DELETE</td> </tr> <tr> <td>NAME</td> <td>SINDELL, ALLAN F</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1479 UNIT C</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER FL 33755</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	D	☒ DELETE	NAME	GRUBELIC, NO		STREET ADDRESS	1479 UNIT C		CITY-ST-ZIP	CLEARWATER FL 33755		TITLE	D	☐ DELETE	NAME	SINDELL, ERIC A		STREET ADDRESS	1479 UNIT C		CITY-ST-ZIP	CLEARWATER FL 33755		TITLE	D	☐ DELETE	NAME	SINDELL, ALLAN F		STREET ADDRESS	1479 UNIT C		CITY-ST-ZIP	CLEARWATER FL 33755		TITLE		☐ DELETE	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		☐ DELETE	NAME			STREET ADDRESS			CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1"> <tr> <td>1.1 TITLE</td> <td>P</td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>1.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>1.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>2.1 TITLE</td> <td>P</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>2.2 NAME</td> <td>Eric A. Sindell</td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td>1479 Unit C</td> <td></td> </tr> <tr> <td>2.4 CITY-ST-ZIP</td> <td>Clearwater, FL 33755</td> <td></td> </tr> <tr> <td>3.1 TITLE</td> <td>V</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>3.2 NAME</td> <td>Allan F. Sindell</td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td>1521 Dexter Drive</td> <td></td> </tr> <tr> <td>3.4 CITY-ST-ZIP</td> <td>Clearwater, FL 33756</td> <td></td> </tr> <tr> <td>4.1 TITLE</td> <td>S/T</td> <td>☐ Change ☒ Addition</td> </tr> <tr> <td>4.2 NAME</td> <td>Sonja Lee Sindell</td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td>1521 Dexter Drive</td> <td></td> </tr> <tr> <td>4.4 CITY-ST-ZIP</td> <td>Clearwater, FL 33756</td> <td></td> </tr> <tr> <td>5.1 TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>5.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>5.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>6.1 TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>6.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>6.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			1.1 TITLE	P	☐ Change ☐ Addition	1.2 NAME			1.3 STREET ADDRESS			1.4 CITY-ST-ZIP			2.1 TITLE	P	☒ Change ☐ Addition	2.2 NAME	Eric A. Sindell		2.3 STREET ADDRESS	1479 Unit C		2.4 CITY-ST-ZIP	Clearwater, FL 33755		3.1 TITLE	V	☒ Change ☐ Addition	3.2 NAME	Allan F. Sindell		3.3 STREET ADDRESS	1521 Dexter Drive		3.4 CITY-ST-ZIP	Clearwater, FL 33756		4.1 TITLE	S/T	☐ Change ☒ Addition	4.2 NAME	Sonja Lee Sindell		4.3 STREET ADDRESS	1521 Dexter Drive		4.4 CITY-ST-ZIP	Clearwater, FL 33756		5.1 TITLE		☐ Change ☐ Addition	5.2 NAME			5.3 STREET ADDRESS			5.4 CITY-ST-ZIP			6.1 TITLE		☐ Change ☐ Addition	6.2 NAME			6.3 STREET ADDRESS			6.4 CITY-ST-ZIP		
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14. 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 annual report or supplemental annual 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Eric A. Sindell**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99 **727-446-8804**
Date Daytime Phone #

CR2E034 (1/98)