

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000040032

FILED
Apr 01, 2011
Secretary of State

Entity Name: SURECRETE DESIGN PRODUCTS, INC.

Current Principal Place of Business:

15246 CITRUS COUNTRY DRIVE
DADE CITY, FL 33523

New Principal Place of Business:

15246 CITRUS COUNTRY DRIVE
DADE CITY, FL 33523 UN

Current Mailing Address:

15246 CITRUS COUNTRY DRIVE
DADE CITY, FL 33523

New Mailing Address:

15246 CITRUS COUNTRY DRIVE
DADE CITY, FL 33523 UN

FEI Number: 59-3504097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, STEVEN A
15246 CITRUS COUNTRY DRIVE
DADE CITY, FL 33523 US

Name and Address of New Registered Agent:

THOMAS, STEVEN A
37421 SKYRIDGE CIRCLE
DADE CITY, FL 33525-083 US

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.

SIGNATURE:

04/01/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: THOMAS, JACK J
Address: 1314 RIVERVIEW DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689 UN

Title: P
Name: THOMAS, STEVEN A
Address: 37421 SKYRIDGE CIRCLE
City-St-Zip: DADE CITY, FL 33525 UN

Title: TR
Name: THOMAS, TERESA M
Address: 37421 SKYRIDGE CIRCLE
City-St-Zip: DADE CITY, FL 33525 UN

Title: SEC
Name: THOMAS, TERESA M
Address: 37421 SKYRIDGE CIRCLE
City-St-Zip: DADE CITY, FL 33525 UN

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN A THOMAS

PRES

04/01/2011

Electronic Signature of Signing Officer or Director

Date