

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000071921

Entity Name: ENVIROCOAT, INC.

FILED
Jan 05, 2006
Secretary of State

Current Principal Place of Business:

1865 SW 4TH AVENUE, #D3
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

1865 SW 4TH AVENUE, #D3
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 65-0861875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAELSON, MARK
4968 NW 3RD AVENUE
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MICHAELSON, MARK
Address: 4968 NW 3 AVENUE
City-St-Zip: BOCA RATON, FL 33431

Title: VP () Delete
Name: MICHAELSON, DAVID
Address: 20591 CAROUSEL CIRCLE WEST
City-St-Zip: BOCA RATON, FL 33434

Title: PD () Delete
Name: MICHAELSON, THEODORE L
Address: 1499 SW 2ND AVENUE
City-St-Zip: BOCA RATON, FL 33432

Title: ST () Delete
Name: MICHAELSON, DAVID
Address: 20591 CAROUSEL CIRCLE WEST
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THEODORE MICHAELSON

PD

01/05/2006

Electronic Signature of Signing Officer or Director

Date