

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90104 030 ***150.00

DOCUMENT # P99000005541



1. Entity Name
INNOVATIVE SURFACE TECHNOLOGIES, INC.

Principal Place of Business
**1181 43RD ST N
STE G
CLEARWATER FL 33760**

Mailing Address
**1181 43RD ST N
STE G
CLEARWATER FL 33760**



2. Principal Place of Business

3. Mailing Address

7000 Bryan Dairy Rd

7000 Bryan Dairy Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite A-11

Suite A-11

City & State

City & State

Largo Florida

Largo, Florida

Zip
33777

Country
USA

Zip
33777

Country
USA

4. FEI Number **59-3548429**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New-Registered Agent

**STELL, JASON R
2025 LAKE AVE
UNIT D
LARGO FL 33771**

*New
Address*

Name

Stell, Jason R.

Street Address (P.O. Box Number is Not Acceptable)

7203 121 ST. Terrace

City

Largo

FL

Zip Code

33773

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, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **STELL, JASON REED**
STREET ADDRESS **2025 LAKE AVE, UNIT D**
CITY-ST-ZIP **LARGO FL 33771**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REASONER, STELL

4-21-03

**(727)
545-9801**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)