2001 UNIFORM BUSINESS REPORT (UBR)

May 15, 2001 8:00 am Secretary of State DOCUMENT # P99000055521 CERAMIC COATINGS TECHNOLOGIES, INC. 05-15-2001 90112 034 ***150.00 Mailing Address Principal Place of Business 485 SW PORT WAY 485 SW PORT WAY PALM CITY FL 34990 PALM CITY FL 34990 00052117 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0931978 Not Applicable \$8.75 Additional Country Zip Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) PRINZ, BETH TEARDO 1100 S. FEDERAL HWY. STUART FL 34994 CityTUART 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 SIGNATURE RICHARD DUNCEY Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change CFOP ☐ Detete TITLE NAME PEARSALL, THOMAS J NAME STREET ADDRESS 4306 CARGO WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM CITY FL 34990 Change ☐ Addition TITLE ☐ Delete TITLE NAME TAYLOR, SUSAN NAME STREET ADDRESS 2275 SWALLOW HILL ROAD, BLDG 2500 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA 15229 Change ☐ Addition TITLE ☐ Delete TITLE NAME COOPER, FRED E NAME STREET ADDRESS 2275 SWALLOW HILL ROAD, BLDG 2500 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA 15220 Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Detete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

SUSAN TAYLOR 4-30-01 (412)429-0623 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.