

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S54187 (7)

1. Corporation Name

SURFACE TECHNIQUES CORPORATION



Principal Place of Business

1509 1/2 49TH STREET SOUTH
GULFPORT FL 33707

Mailing Address

1509 1/2 49TH STREET SOUTH
GULFPORT FL 33707

2. Principal Place of Business

21 Subst. Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Subst. Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

05/20/1991

3a. Date of Last Report

04/04/1995

4. FEI Number

52-3069258

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BERGER, TODD
810 63RD AVENUE NORTH
ST PETERSBURG FL 33702

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature of Corporation (to be signed by officer or director)

Signature of Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
PD	LACEY, PHILIP	893 PASEO DEL RIO ST NE	ST PETERSBURG FL	
SD	MCCARTHY, JACK	11297 RIDERMARK ROW	COLUMBIA MD	
TD	BERGER, HOWARD	270 TOSCA DR	STOUGHTON MA	
				☐ DELETE
				☐ DELETE
				☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	☐ Change ☐ Addition
2.1 TITLE <td>2.2 NAME<td>2.3 STREET ADDRESS<td>2.4 CITY-ST-ZIP<td>☐ Change ☐ Addition</td></td></td></td>	2.2 NAME <td>2.3 STREET ADDRESS<td>2.4 CITY-ST-ZIP<td>☐ Change ☐ Addition</td></td></td>	2.3 STREET ADDRESS <td>2.4 CITY-ST-ZIP<td>☐ Change ☐ Addition</td></td>	2.4 CITY-ST-ZIP <td>☐ Change ☐ Addition</td>	☐ Change ☐ Addition
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/96

813 323 0022

Date

Day/In Phone #

CR2E034 (12/95)