SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT#

DIAMOND DECK COATING, INC.

FILED Jul 27, 1999 8:00 am Secretary of State

07-27-1999 90027 022 ***150.00

DIAMON	DECK COATING, INC.							
Principal Place	of Rusiness	Mailing Address					D) 0 1 1 1 1 1 1 1 1 1	JI.
•		142 N.W. 10TH COURT						
142 N.W. 10TH COURT 142 N.W. 10TH COURT BOYNTON BEACH FL 33426 BOYNTON BEACH FL 3								
US US						DO NOT WRITE IN THIS	SPACE	
		•				3. Date Incorporated or Qualified 09/13/1991		
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number	Applied For	
21	-	26				65-0287914	Not Applicable	3
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22		27					Fee Required	4
City & State)	City & State				6. Election Campaign Financing	\$5.00 May Be	Ţ
23		28				Trust Fund Contribution	Added to Fees	_
Zip	Country	Zip	Coun			8. This corporation owes the current year		1
24	25	29	30			Intangible Personal Property.	Yes No	-
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registered	Agent	\dashv
MC	MAHON, JAMES L.				Maine			
142 N.W. 10TH COURT				82	Street Add	ess (P.O. Box Number is Not Acceptable)		
	NTON BEACH FL 33426							
	THE STATE OF THE			83				- [
				84	City	FL	85 Zip Code	7
44 5	1- N	2 and 607 1509 Florido Statut	on the ob	1	named com	oration submits this statement for the purpose of ch	anging its registered	
office or	registered agent, or both, in the State	of Florida. Such change was	authonze	d by t	the corpora	tion's board of directors. I hereby accept the appoi	ntment as registered	
agent. I a	im familiar with, and accept the obliga	ations of, section 607.0505, FI	orida Stat	tutes.				- }
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable (N	OTF: Registe	nred An	ent signature re	equired when reinstating) DATE		1-
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	7,00/5/
TITLE	P	DELETE	1.1 TI	TLE			Change Addition	
NAME	MCMAHON, JIM		1.2 N	1.2 NAME			- • -	E034
STREET ADDRESS	142 N.W. 10TH COURT	1.3		1.3 STREET ADDRESS				
CITY-ST-ZIP	BOYNTON BEACH FL 33426		1.4 CITY-ST-ZIP		ZIP .) ģ
TITLE	T	DELETE	DELETE 2.1 TITL				Change Addition	\neg
NAME	NELSON, JIM	<u>—</u>		AME	- 1			-
STREET ADDRESS	2313 DONALD ROAD		2.3 ST	2.3 STREET ADDRESS		and the second s		
CITY-ST-ZIP	WEST PALM BEACH FL 3340	6	2.4 CI	ITY-ST-	ŽIP			
TITLE		DELETE	3.1 TI	TLE		******	Change Addition	, T
NAME	1		3.2 N	AME	(
STREET ADDRESS			3.3 \$7	TREET A	ADDRESS			
CITY-ST-ZIP			3.4 CI	TY-ST-	ZIP _			
TITLE		DELETE	4.1 TI	TLE			Change Addition	3
NAME		 · -	4.2 N	AME			· —	ļ
STREET ADDRESS			4.3 ST	REET A	ADDRESS			ŀ
CITY-ST-ZIP			4.4 CI	ITY-ST-	ZIP _	<u></u>		
TITLE		DELETE 5.1 T		TLE			Change Addition	1
NAME	! !	<u> </u>	5.2 N	AME	ł			ļ
STREET ADDRESS			5.3 ST	TREET A	ADDRESS			İ
CITY-ST-ZIP				ITY-ST-				
TITLE		DELETE	6.1 TI				Change Addition	1
NAME			6.2 N/	AME			- —	
STREET ADDRESS			6.3 ST	TREET	ADDRESS			
CITY-ST-ZIP			6.4 CI	ITY-ST-	ZIP			
						wine 440 07/3/i) Florido Statutos I further cortifu		

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 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:

596685-90027-22