

**SURFACE COATING OPERATIONS
AIR GENERAL PERMIT REGISTRATION FORM**

Part II. Notification to Permitting Office

(Detach and submit to appropriate permitting office; keep copy onsite)

Instructions: To give notice to the Department of an eligible facility's intent to use this air general permit, the owner or operator of the facility must detach and complete this part of the Air General Permit Registration Form and submit it to the appropriate Department of Environmental Protection or local air pollution control program office which has permitting authority. Please type or print clearly all information, and enclose the appropriate air general permit registration processing fee pursuant to Rule 62-4.050, F.A.C. (\$100 as of the effective date of this form)

Registration Type

Check one:

INITIAL REGISTRATION - Notification of intent to:

- Construct and operate a proposed new facility.
 Operate an existing facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit).

RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:

- Continue operating the facility after expiration of the current term of air general permit use.
 Continue operating the facility after a change of ownership.
 Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C., or any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

1030538-001

Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only

If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. In such case, check the first box, and indicate the operation permits being surrendered. If no air operation permits are held by the facility, check the second box.

- All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s): _____
 No air operation permits currently exist for this facility.

General Facility Information

Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)

DREAM CABINETS CO INC.

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)

Facility Location (Provide the physical location of the facility, not necessarily the mailing address.)

Street Address: **2150 TALL PINES DR.**

City: **LARGO**

County: **PINELLAS**

Zip Code: **33771**

Facility Start-Up Date (Estimated start-up date of proposed new facility.) (N/A for existing facility)

N/A

Owner/Authorized Representative

Name and Position Title (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)

Print Name and Title: **MONIKA SMAGA, OWNER**

Owner/Authorized Representative Mailing Address

Organization/Firm:

Street Address: **2150 TALL PINES DR**

City: **LARGO**

County: **PINELLAS**

Zip Code: **33771**

Owner/Authorized Representative Telephone Numbers

Telephone: **727-535-8384**

Fax: **727 535 8764**

Cell phone (optional):

Facility Contact (If different from Owner/Authorized Representative)

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title:

Facility Contact Mailing Address

Organization/Firm:

Street Address:

City:

County:

Zip Code:

Facility Contact Telephone Numbers

Telephone:

Fax:

Cell phone (optional):

Owner/Authorized Representative Statement

This statement must be signed and dated by the person named above as owner or authorized representative

I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.

I will promptly notify the Department of any changes to the information contained in this registration form.

Signature

Monika Smaga

Date

7/7/09

Material Usage Rates

If this is an **initial registration** for a surface coating operation, provide an estimate of the average quantity of volatile organic compounds in all coatings (solvents and thinners) expected to be used on a daily basis.

23.47 lbs per day

OK
(244 #/D)

If this is a **re-registration** for an existing surface coating operation, provide the highest monthly average of the daily quantity of volatile organic compounds in all coatings (solvents and thinners) used in the last five years. Indicate the month and year during which this usage occurred.

Description of Facility

Below, or as an attachment to this form, provide a description of the surface coating operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used.

Dream Cabinets Co., Inc. manufactures wood cabinets from sheet stock and coats the cabinets in a free standing manual spray paint booth, and an automated spray paint conveyor.

- 1) Manual spray booth and automated spray machine / booth (single line).
Side mount (wall) fan 3' x 3' approx. 10' above ground level vents the spray / chemical storage room.

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<h2>Detail by Entity Name</h2> <h3><u>Florida Profit Corporation</u></h3> <p>DREAM CABINETS COMPANY, INC.</p> <h3><u>Filing Information</u></h3> <p> Document Number P00000105368 FEI/EIN Number 593684822 Date Filed 11/08/2000 State FL Status ACTIVE Last Event CANCEL ADM DISS/REV Event Date Filed 01/13/2009 Event Effective Date NONE </p> <h3><u>Principal Address</u></h3> <p> 2150 TALL PINES DR. LARGO FL 33771 Changed 01/13/2009 </p> <h3><u>Mailing Address</u></h3> <p> 2150 TALL PINES DR. LARGO FL 33771 Changed 01/13/2009 </p> <h3><u>Registered Agent Name & Address</u></h3> <p> MONIKA, SMAGA 19817 GULF BLVD #202 INDIAN ROCKS BEACH FL 33785 US Name Changed: 05/06/2002 Address Changed: 04/28/2005 </p> <h3><u>Officer/Director Detail</u></h3> <p> Name & Address Title D SMAGA, MONIKA 19817 GULF BLVD #202 INDIAN ROCKS BEACH FL 33785 Title D SMAGA, ZBIGNIEW 19817 GULF BLVD #202 </p>					

INDIAN ROCKS BEACH FL 33785

Annual Reports

Report Year Filed Date

2007	04/27/2007
2008	01/13/2009
2009	01/13/2009

Document Images

- 01/13/2009 -- REINSTATEMENT
- 04/27/2007 -- ANNUAL REPORT
- 03/16/2006 -- ANNUAL REPORT
- 04/28/2005 -- ANNUAL REPORT
- 07/05/2004 -- ANNUAL REPORT
- 03/05/2003 -- ANNUAL REPORT
- 05/06/2002 -- ANNUAL REPORT
- 04/25/2001 -- ANNUAL REPORT
- 11/08/2000 -- Domestic Profit

Note: This is not official record. See documents if question or conflict.

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