

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 333523

Entity Name: EAST COAST OILS, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

41 S. EDGEWOOD AVENUE
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 6336
JACKSONVILLE, FL 322366336

New Mailing Address:

FEI Number: 58-1076860 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERT H. OSTENDORF
8541 ROYALWOOD DRIVE
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: FELIX, CONRAD S,
Address: 1914 ORLEAN DR
City-St-Zip: JACKSONVILLE, FL, FL 32210

Title: PD () Delete
Name: ROBERT H. OSTENDORF,
Address: 8541 ROYALWOOD DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: STD () Delete
Name: BRUNILDA R. SEPULVEDA, A
Address: 4747 ROYAL AVE
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUNILDA R. SEPULVEDA

STD

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date