2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2004 8:00 am
Secretary of State
02-23-2004 90059 027 ***150.00

DOCUMENT # M72004

1. Entity Name

GOLD COAST ALUMINUM, INC.

MOORE CR2E034 (11/03)

Principal Place of Business	Mailing Address
2605 OHIO AVE FORT PIERCE FL 34947 US	2605 OHIO AVE 206 CHAMBERLIN BLVD FORT PIERCE FL 34947 US

2. Principal Place of Business	3. Mailing Address
	2605 Ohio Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Fort Pierce Fl.
Zip / Country	Zip: 34947 / Country: St Lucie/US.

4. FEI Number: 65-0059156 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CLAY, DENNIS J
206 CHAMBERLIN BLVD
FT PIERCE FL 34946

7. Name and Address of New Registered Agent

Name: DENNIS J CLAY

Street Address (P.O. Box Number is Not Acceptable): 2605 Ohio Ave.

City: Fort Pierce, FL Zip Code: 34947

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: DENNIS J CLAY - Director — Dennis Clay — 2/16/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CLAY, CHRISTOPHER C ~~206 CHAMBERLIN BLVD~~ FT PIERCE FL ~~34946.~~	☐ Delete	VP Christopher C. Clay 2840 Stoneway Ln. Apt-D Fort Pierce Fl. 34982	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLAY, DENNIS ~~206 CHAMBERLIN BLVD~~ FT PIERCE ~~FL 34946.~~	☐ Delete	S/D Dennis Clay 2605 Ohio Ave. Fort Pierce Fl. 34947	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	T Phillip Adams 5106 Birch Dr. Fort Pierce Fl. 34982	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dennis Clay DENNIS CLAY — 2/16/04 — 772-878-0882
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #