2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000006686

Entity Name: GOLD COAST RINGERS, INC.

FILED Mar 26, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4508 BRANDYWINE DR. BOCA RATON, FL 33487 **Current Mailing Address: New Mailing Address:** 4508 BRANDYWINE DR BOCA RATON, FL 33487 FEI Number: 65-0960689 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HIBBS, JACK 3010 N.E. 12TH AVE. POMPANO BEACH, FL 33064 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete RIX, JESSIE NIEMCZYK, PAT MS Name: Name: 6700 MARTIN RD. Address: 4831 NE 23RD AVE, APT 2 Address: City-St-Zip: MARGATE, FL 33068 City-St-Zip: FORT LAUDERDALE, FL 33308 US Title: VD () Delete Title: (X) Change () Addition GARVIN, CHRISTIAN Name: BUTRYM, GENE MRS Name: Address: 7554 OAK GROVE CIR Address: 3271 NE 4TH AVE City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: BOCA RATON, FL 33431 US Title: () Delete Title: (X) Change () Addition JARVI, MARLYS STAMPFL, MARIE MRS Name: Name: 621 NW 182ND WAY Address: 461 N.E. 46TH ST. Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: PEMBROKE PINES, FL 33029 US Title: TD () Delete Title: TD (X) Change () Addition Name: KREKEL, LETITIA Name: KREKEL, LETITIA Address: 3810 N.W. 60TH CT. Address: 3810 N.W. 60TH CT. City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166 US Title: () Delete Title: (X) Change () Addition HENNON, TOM HENNON, TOM Name: Name:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

SIGNATURE: TOM HENNON D 03/26/2003

4508 BRANDYWINE DR. (GENERAL MANAGER)

BOCA RATON, FL 33487

3010 N.E. 12TH AVE.

HIBBS, JACK

() Delete

POMPANO BEACH, FL 33064

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

4508 BRANDYWINE DR. (GENERAL MANAGER)

(X) Change () Addition

BOCA RATON, FL 33487 US

POMPANO BEACH, FL 33064 US

HIBBS, JACK

3010 N.E. 12TH AVE.