2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 24, 2006 08:00 AM Secretary of State DOCUMENT # P02000096004 1. Entity Name INTRACOASTAL PROPERTIES, INC. Principal Place of Business Mailing Address 6261-2 BAY CLUB DRIVE FT LAUDERDALE FL 33308 6261-2 BAY CLUB DRIVE FT LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 05-0561985 Not Applicable Zια Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUCCI, RAPHAEL C Street Address (P.O. Box Number is Not Acceptable) 6261 2 BAY CLUB DRIVE FORT LAUDERDALE FL 33308 City Zip Code 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 Signature Typers or previous name of registerest agent and little a applicable INDIE Registered Apent signature required when reinstations TATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. U00000525352 Charge Addition in e תופק ☐ Defete TITLE RUCCI, RAPHAEL C NAME MAME 05/04/06-80030-016 150.00 STREET ADDRESS STREET ADORESS 6261-2 BAY CLUB DRIVE CITY-ST-ZIP FT LAUDERDALE FL 33308 CITY-ST-ZIP BILL ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY ST ZIP CITY-ST-ZIP Delete ☐ Change iiiiif THUE Addition NAME MARK STREET ADDRESS STREET AODRESS CITY-ST-ZIP CITY-ST-ZIP RIKE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP mile ☐ Delete TITLE Addition Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP tift ☐ Defete TITLE Change ☐ Addition MAME STREET ADDRESS STREET ADDRESS CLTY-ST-ZIP CITY - ST- ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, 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

INTEA COASTAL PROPERTIES INC.

SIGNATURE:

A/21/oL (9.14) 776-6/5/