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1997 AUG 18 PM 12:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000034911 (3)

1. Corporation Name

GULF COAST COIN AND JEWELRY EXCHANGE, INC.

Principal Place of Business

POST OFFICE BOX 27115  
EL JOBEAN FL 33927

Mailing Address

POST OFFICE BOX 27115  
EL JOBEAN FL 33927-7115

3. Date Incorporated or Qualified

04/18/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

65-0687341

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

21

Suite, Apt. #, etc.

25

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

ALMAN, JOHN E  
4352 EL JOBEAN ROAD #B  
PORT CHARLOTTE FL 33953

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE JOHN E. ALMAN PRESIDENT

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-97

12. OFFICERS AND DIRECTORS

TITLE VICE - PRESIDENT ☐ DELETE

NAME STANISLAV TIROUT  
STREET ADDRESS 14578 RIVERBEACH DR  
CITY-ST-ZIP PORT CHARLOTTE, FL 33953

TITLE PRESIDENT ☐ DELETE

NAME JOHN E. ALMAN  
STREET ADDRESS 14578 RIVERBEACH DR #215  
CITY-ST-ZIP PORT CHARLOTTE, FL 33953

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addit.

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addit.

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addit.

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addit.

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addit.

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addit.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 12 or Block 13, if changed or when attached with an address.

SIGNATURE:  SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-97

941-255-8252



## Gulf Coast Coin and Jewelry Exchange

4352 El Jobean Rd.  
Pt. Charlotte, FL 33953

Telephone 941-255-8252

Fax 941-627-9557

Aug 1, 1997

Florida Department Of State  
Division Of Corporations  
PO Box 6327  
Tallahassee, FL. 32314

Dear Sirs,


Enclosed, please find a photocopy of my original completed form which I sent to your office on April 28, 1997.

To date I have not received my cancelled check back from my bank. The bank has advised me that the check has not been cashed. I can only assume that the check was lost in the mail. I do not want to have to pay \$550.00 fee for filing late, since I really was not delinquent.

I hope that your office will accept the enclosed payment and copy of the original form? I was advised to do this by a gentleman named Michael from your office. Michael also advised me to sign over my signature as you need an original signature.

I thank you in advance for your cooperation in this matter, as I don't want my corporation to be listed as filing late.

Sincerely,

  
John E. Alman  
President