2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State
04-14-2008 90028 041 ***158.75

DOCUMENT # S79962

1. Entity Name
COASTAL OPTICAL SYSTEMS, INC.

401

Principal Place of Business	Mailing Address
4480 TIFFANY DR S WEST PALM BCH, FL 33407 US	4480 TIFFANY DR S WEST PALM BCH, FL 33407 US

04102008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
16490 Innovation Drive Suite, Apt. #, etc.	16490 Innovation Drive Suite, Apt. #, etc.
City & State: Jupiter, FL	City & State: Jupiter, FL
Zip: 33478 Country: USA	Zip: 33478 Country: USA

4. FEI Number: 65-0284601 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KUMLER, JAMES J. 151 PENNOCK TRACE DRIVE JUPITER, FL 33458	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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: James Kumler 04/10/08
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, 2008 Fee will be $550.00

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	V NEER, MARC 120 LEHANE TERRACE NORTH PALM BEACH, FL 33408	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Birner, Henry Jenoptik Laser, Optik, Systeme GmbH D-07739 Jena Germany	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD KUMLER, JAMES J. 151 PENNOCK TRACE DRIVE JUPITER, FL 33458	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Meyer, Juergen Jenoptik Laser, Optik, Systeme GmbH D-07739 Jena Germany	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD MALCOM, HENRY R. 1090 CHENILLE CIRCLE WESTON, FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Rothweiler, Dirk Jenoptik Laser, optik Systeme GmbH D-07739 Jena Germany	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V WILDER, SUSAN M. 1982 RIDGE ROAD JUNO BEACH, FL 33408	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HOLLIGER, ULRICH 5112 CROSSING ROCKS CT. RIVIERA BEACH, FL 33407	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.

SIGNATURE: Susan Wilder Susan Wilder VP 4/10/08 561-881-7400 x 122
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #