

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 01, 1999 8:00 am
Secretary of State

04-01-1999 90100 049 ***150.00

DOCUMENT # P97000077938

1. Corporation Name

COASTLINE PROPERTY HOLDING CORP.



Principal Place of Business

C/O ALAN G. KIPNIS
ONE FINANCIAL PLAZA SUITE 2308
FORT LAUDERDALE FL 33394

Mailing Address

C/O ALAN G. KIPNIS
ONE FINANCIAL PLAZA SUITE 2308
FORT LAUDERDALE FL 33394

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/09/1997

4. FEI Number

65-0779952

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒

Yes

☐

No

% Blass & Frankel, PA

% Blass & Frankel, PA

2. Principal Place of Business

21 One Southeast Third Ave

2a. Mailing Address

26 One Southeast Third Ave

Suite, Apt. #, etc.

22 Suite 2130

Suite, Apt. #, etc.

27 Suite 2130

City & State

23 Miami FL

City & State

28 Miami FL

Zip

24 33131

Country

25 USA

Zip

29 33131

Country

30 USA

9. Name and Address of Current Registered Agent

KIPNIS, ALAN G ESQ
KIPNIS TESCHER LIPPMAN & VALINSKY
ONE FINANCIAL PLAZA SUITE 2308
FORT LAUDERDALE FL 33394

10. Name and Address of New Registered Agent

81 Name
Caprolite Corporation
82 Street Address (P.O. Box Number is Not Acceptable)
One Southeast Third Ave.
83 Suite 2130
84 City
MIAMI
85 Zip Code
FL 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

Melvin F. Frankel
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Melvin F. Frankel, President

1/19/99

12. OFFICERS AND DIRECTORS

TITLE VPD
NAME VOICE, STEPHEN
STREET ADDRESS 91 COMPASS LANE
CITY-ST-ZIP FT. LAUDERDALE FL 33308

☐ DELETE

TITLE PD
NAME VOICE, LISA
STREET ADDRESS 91 COMPASS LANE
CITY-ST-ZIP FT. LAUDERDALE FL 33308

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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; 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STEPHEN VOICE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/99 (305) 377-9353
Date Daytime Phone #

CR2E034 (11/98)

0319409