## I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 05/01/2021

SIGNATURE: CARIDAD PINTO

Electronic Signature of Signing Officer/Director Detail

| 2021 | FLORIDA PROFIT | CORPORATION | ANNUAL REPORT |
|------|----------------|-------------|---------------|
|      |                |             |               |

DOCUMENT# P05000123613

Entity Name: COASTAL LEASING SOLUTIONS INC

### **Current Principal Place of Business:**

1541 S WICKHAN ROAD MELBOURNE, FL 32904

#### **Current Mailing Address:**

1541 S WICKHAN ROAD MELBOURNE, FL 32904 US

## FEI Number: 20-3471055

### Name and Address of Current Registered Agent:

GEMMELL, MICHAEL S 565 JACKSON AVE UNIT C SATELLITE BEACH, FL 32937 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

### **Officer/Director Detail :**

| Title           | D                        | Title           | Р                        |  |
|-----------------|--------------------------|-----------------|--------------------------|--|
| Name            | ROQUE, GEORGE E          | Name            | PINTO, CARIDAD J         |  |
| Address         | 521 TURTLE CIRCLE        | Address         | 521 TURTLE CIRCLE        |  |
| City-State-Zip: | SATELLITE BEACH FL 32937 | City-State-Zip: | SATELLITE BEACH FL 32937 |  |

# Certificate of Status Desired: No

Date

FILED May 01, 2021 Secretary of State 9801891837CC

PRESIDENT

Date