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.

SIGNATURE: ANGEL FUENTES

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000045694

Entity Name: COASTAL DRYWALL SPECIALTIES IV INC

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

941 POCAHONTAS DRIVE APT 43 FORT WALTON BEACH, FL 32547

## **Current Mailing Address:**

941 POCAHONTAS DRIVE APT 43 FORT WALTON BEACH, FL 32547 US

## FEI Number: 81-2742290

## Name and Address of Current Registered Agent:

WATSON, CRISTAL R 3690F CRESWICK CIRCLE ORANGE PARK, FL 32065 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.

	The above hamed				
	SIGNATURE:	CRISTAL R WATSON			05/29/2018
		Electronic Signature of Registered Agent			Date
Officer/Director Detail :					
	Title	PSD	Title	VP	
	Name	FUENTES, ANGEL	Name	SURIANO, MIGUEL E	
	Address	941 POCAHONTAS DRIVE APT 43	Address	4408 LAPLACE ST	
	City-State-Zip:	FT WALTON BEACH FL 32547		APT B	
			City-State-Zip:	METAIRIE LA 70006	

FILED May 29, 2018 Secretary of State CC5517395744

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PRESIDENT

05/29/2018