

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 649240 (9)

1. Corporation Name

COAST TO COAST, INC.



Principal Place of Business

Mailing Address

2937 SW 27TH AVE
STE 305
MIAMI FL 33133
US

2937 SW 27TH AVE
STE 305
MIAMI FL 33133
US

3. Date Incorporated or Qualified

12/26/1979

3a. Date of Last Report

06/02/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1951662

Applied For

Not Applicable

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23

City & State

City & State

24

Zip

Country

Zip

Country

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

□

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RICHTER, MARY ANNE L
36 PORTSIDE DRIVE
FT. LAUDERDALE FL 33316

81

Name

Tony Lostumbo

82

Street Address, P.O. Box Number, is Not Acceptable

16762 Golfview Drive

83

84

Fort Lauderdale

FL

Zip Code

33326

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

Tony Lostumbo

Tony Lostumbo

4/12/96

Signature, type, or printed name of registered agent and title if applicable

Signature, type, or printed name of registered agent and title if applicable

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☒ DELETE

NAME RICHTER, MARY ANNE L.
STREET ADDRESS 36 PORTSIDE DR.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE V ☒ DELETE

NAME LOSTUMBO, MARY M.
STREET ADDRESS 825 E WILLOW ST
CITY-ST-ZIP SYRACUSE NY

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

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)