ANNUAL REPORT (AR)

FILED
May 08, 2007 8:00 am
Secretary of State
05-08-2007 90016 011 ****61.25

DOCUMENT # 714882

1. Entity Name

COASTAL VILLAS INC

Principal Place of Business	Mailing Address
2200 E HALLANDALE BEACH BLVD HALLANDALE FL 33009	2200 E HALLANDALE BEACH BLVD HALLANDALE FL 33009

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

1st MOORE CR2E037 (10/06)

FEI Number: 59-1232428 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BARANEK, STANLEY
2200 E. HALLANDALE BEACH BLVD.
APT 308
HALLANDALE FL 33009

7. Name and Address of New Registered Agent

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VP BELZ, STEVE 5144 NE 18TH TERRACE FT. LAUDERDALE FL 33308	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VP Robert Fishbain 6693-Hannah Cove West Palm Bch-FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P HYMEN, STEINBERG 2200 E HALLANDALE BCH BLVD, APT 310 HALLANDALE FL 33009	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	S Angelo Gonzalez 100 Golden Isles Dr. #1210 Hallandale, FL 33009	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	S BILAN, WERONIKA 2200 E HALLANDALE BCH BLVD APT 308 HALLANDALE FL 33009	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	F Jackie Goodman 2200-E Hallandale Bch Blv, Apt 312 Hallandale, FL 33009	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	T OLIVEIRA, CELIA 2200 E HALLANDALE BCH BLVD., #410 HALLANDALE FL 33009	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	M Steve Belz 5144-NE-18th Terr Ft. Lauderdale, FL 33308	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	M BARANEK, STANLEY 2200 E HALLANDALE BCH., #508 HALLANDALE FL 33009	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	M Luis Garcia 1962-NW 88th AVE Miami, FL 33018	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	M Harry Kanadjian 2200 E-Hallandale Bch #602 Hallandale, FL 33009	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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: Jackie Goodman JACKIE GOODMAN 4/26/07 954-454-0363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

ATTACHMENT

40108340

[redacted]

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APT 308
HALLANDALE FL 33009

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Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VP	☒ Delete
NAME	BELZ, STEVE	
STREET ADDRESS	5144 NE 18TH TERRACE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
TITLE	P	☐ Delete
NAME	HYMEN, STEINBERG	
STREET ADDRESS	2200 E HALLANDALE BCH BLVD, APT 310	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	S	☒ Delete
NAME	BILAN, WERONIKA	
STREET ADDRESS	2200 E HALLANDALE BCH BLVD APT 308	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	T	☒ Delete
NAME	OLIVEIRA, CELIA	
STREET ADDRESS	2200 E HALLANDALE BCH BLVD., #410	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	M	☒ Delete
NAME	BARANEK, STANLEY	
STREET ADDRESS	2200 E HALLANDALE BCH., #508	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP	☐ Change ☒ Addition
NAME	Robert Fishbain	
STREET ADDRESS	6693 - Hannah Cove	
CITY-ST-ZIP	West Palm Bch - FL 33411	
TITLE	S	☐ Change ☐ Addition
NAME	Angelo Gonzalez	
STREET ADDRESS	100 E Golden Isles Dr. #1210	
CITY-ST-ZIP	Hallandale, FL 33009	
TITLE	T	☐ Change ☒ Addition
NAME	Jackie Goodman	
STREET ADDRESS	2200 E Hallandale Bch Blv, Apt 312	
CITY-ST-ZIP	Hallandale, FL 33009	
TITLE	M	☐ Change ☐ Addition
NAME	Steve Belz	
STREET ADDRESS	5144 - NE 18th Terr	
CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
TITLE	M	☐ Change ☒ Addition
NAME	Luis Garcia	
STREET ADDRESS	19621 - NW 88th AVE	
CITY-ST-ZIP	Miami, FL 33018	
TITLE	M	☐ Change ☒ Addition
NAME	Harry Kanadjian	
STREET ADDRESS	2200 E Hallandale Bch #602	
CITY-ST-ZIP	Hallandale, FL 33009	

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SIGNATURE: Jackie Goodman JACKIE GOODMAN 4/26/07 954-454-0363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Coastal VII
Apartments,
Inc.
2200 East Hallandale Boulevard
Hallandale, Florida 33009

ATTACHMENT
40108340
#714882
4/26/07

To Whom it may Concern!..

Please excuse the ripped original paper; by mistake. I am sending you the original and the Copy.

Thank you.

Coastal VII - Apt.

tel. 954. 454-0363.