

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # F94000003373 (7)

1. Corporation Name

COASTAL BOOT COMPANY, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 20 PM 4:26

Principal Place of Business

1232 NE 2ND AVE.
MIAMI FL 33132

Mailing Address

1232 NE 2ND AVE.
MIAMI FL 33132

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/27/1994

3a. Date of Last Report

4. FEI Number

APPLIED FOR 65-0503904

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

BONDAR, JOEL ESO
420 LINCOLN ROAD MALL
SUITE 512
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name

Joel Bondar Esq.

82

Street Address (P.O. Box Number is Not Acceptable)

83

1232 N.E. 2nd Ave.

84

City Miami, Fl. 33132

FL

85

Zip Code

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

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

DP

NAME

GLUCKSMAN, JERRY

STREET ADDRESS

1232 NE 2ND AVE.

CITY - ST - ZIP

MIAMI FL 33132

TITLE

DV

NAME

PONTNER, BRUCE

STREET ADDRESS

1232 NE 2ND AVE.

CITY - ST - ZIP

MIAMI FL 33132

TITLE

D

NAME

BONDAR, SANDRA

STREET ADDRESS

1232 NE 2ND AVE.

CITY - ST - ZIP

MIAMI FL 33132

TITLE

DT

NAME

BONDAR, MORRIS

STREET ADDRESS

1232 NE 2ND AVE.

CITY - ST - ZIP

MIAMI FL 33132

TITLE

SD

NAME

GLUCKSMAN, STEVEN

STREET ADDRESS

1232 NE 2ND AVE.

CITY - ST - ZIP

MIAMI FL 33132

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☒ Addition

DV

Yu, Teddy

1232 N.E. 2nd Ave. Miami Fl. 33132

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an amendment with an addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bruce Pontner

1/15/95

(305) 374-9020