# To: Qualification (ax Isen Section Division of Corporations

SUBJECT: COASTAL SURVEY	SINC	78 %
	ration - must include suffix)	98 T
Dear Sir or Madam:	:	7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
The enclosed "Application by Foreign Corporation for A "Certificate of Existence", and check are submitted to retransact business in Florida.	gistër the abovë rëferenced foreign o	corporation to
Please tetum all correspondence concerning this matter t	o the following:	8-6991
KRISTA C. HA		0 4111
KRISTA C. HA	Person)	
COASTAL GURV. (Firm/Con	EYS INC	. 0
(Firm/Con	npány)	680
1601 LOUISE	AVE	P9 588
1601 LOUISE (Addre	ess)	VV
PANAMA CITY (City/State	FL 32401	`
(City/Stat	e/Zip)	1
Should you need to call someone concerning this matter	000002 blaces call: -03/3	2 <b>4719700</b> 80/9801045002 *70.00 *****70.00
KRISTA C. HAMSON OF PED	163-6836	
(Name of Person) at (150 (Area)	Code & Daytime Telephone Numbe	er) /
	· · · · · · · · · · · · · · · · · · ·	14/23
COURIER ADDRESS:	MAILING ADDRESS:	John 4/23
Qualification/Fax Lien Section	Qualification/Tax Lien Section	

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 30, 1998

KRISTA C. HANSON COASTAL SURVEYS INC. 1601 LOUISE AVE. PANAMA CITY, FL 32401

SUBJECT: COASTAL SURVEYS INC.

Ref. Number: W98000006991

We have received your document for COASTAL SURVEYS INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 487-6093.

Freta Lott Corporate Specialist Supervisor

Letter Number: 698A00016822

#### SWORN STATEMENT

I, KRISTA C HANSEN, AFTER BEING DULY SWORN, DO HEREBY DEPOSE AND STATE

AS FOLLOWS: I, AS PRESIDENT OF COASTAL SURVEYS INC. A DELAWARE CORPORATION,

IN MAKING APPLICATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA, DID

ERRONEOUSLY AND INCORRECTLY INDICATE ON LINE 6 THEREOF THAT BUSINESS WAS

TRANSACTED IN FLORIDA IN 1996, WHEN IN FACT I ONLY MEANT TO INDICATE THAT

1996 WAS THE YEAR OF INCORPORATION. ANY BUSINESS TRANSACTION PRIOR TO THE

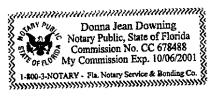
DATE OF THIS APPLICATION DID NOT CONSTITUTE BUSINESS PURSUANT TO SECTION

607.1501 OR 607.1501, FLORIDA STATUTES.

SWORN TO THIS 9th DAY OF APRIL 1998.

C KRISTA C HANSON

SWORN AND SUBSCRIBED TO BEFORE ME, NOTARY PUBLIC, THIS 9th DAY OF APRIL 1998



### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN RI	COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO EGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
	COASTAL SURVEYE IN
	(Name of corporation; must include the work "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2.	State or country under the law of which it is incorporated)  (FEI number, if applicable)
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	(Date of incorporation)  5. PERPETURE (Duration: Year corp. will cease to exist or "perpetual")
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	(1) ale first transacted business in Florida LORP, & INTANTIBLE TAX RETARNS FILED)
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7,	1601 LOUISE AVE
	PANAMA CITY PL 32401 (Current mailing address)
	(Current mailing address)
	· · · · · · · · · · · · · · · · · · ·
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: KRISTA C. HANSON
Of	fice Address: 1601 LOUISE AVE
	PANAMA CITY, Florida, 3240/ (Zip code)
	Zanach de la companya del companya del companya de la companya de
10.	Registered agent's acceptance:
con	ving been named as registered agent and to accept service of process for the above stated corporation at the place designated his application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to apply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

12. Names and ad	ldresses of officers and/or	directors: (Street addre	ss ONLY - P.O. Box I	(O‡ acceptable)	
A. DIRECTORS	(Street address only - I	.O. Box NOT acceptable	le)		
Chairman:	KRISTA	C HANSO	v		
	//				
				*	
Director:	//	11			
Address:			k <sup>1</sup>	; ;	
<del></del>					<del></del>
Director:	//	//			
Address:	1661 204	ISE AVE	PANAMA	CITY FL	32-401
<del></del>	· · · · · · · · · · · · · · · · · · ·			1	
B. OFFICERS	(Street address only -	P.O. Box NOT accep	table)		
President:	KRISTA	C. HAN	150N		
Address:	· · · · · · · · · · · · · · · · · · ·			1	
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Vice President: .	//	,)			
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•			<u>, , , , , , , , , , , , , , , , , , , </u>	3 •	,
Address:					·
		//		i i	
Treasurer:		·	<del></del>	1	
Address:	1601 204	ISE AVE,	PANAMA	city, FL 3!	2401
					Market
NOTE: If fieces	ssary, you may attach an :	addendum to the applicat	ion listing additional c	officers and/or directors	
13	(Signature of Chairman,	Mon	en e	± 1	
			Micer listed in number	12 of the application)	
14	KRISTA C /	HANSON or printed name and cap	anily of house is almost		
	Ciblea	or bennea name and cab	acity of betsou signing	; appucadon)	

## State of Selaware Office of the Secretary of State PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COASTAL SURVEYS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF APRIL, A.D. 1998.

Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

9024892

DATE:

04-14-98

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981136785