## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

561

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Principal Place of Business

2579 CEDAR CREST ROAD

appears in Block 12 or Block

SIGNATURE:

DOCUMENT # G04992

(5)

Mailing Address

2579 CEDAR CREST ROAD

GOLD COAST ROOFING & BUILDERS, INC.

W PALM BCH FL 33415 W PALM BCH FL 33415-8206 3. Date Incorporated or Qualified 3a. Date of Last Report 10/19/1982 04/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 3483S.E. NARRAGANSEH TERRICE 59-2241359 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be YUAA SIUARI 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, MARI 24 Yes No 25 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name VLASIC, PATIENCE T 332 GREENBRIAR DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) PALM SPRINGS FL 33461 83 84 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 titloid applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6)Addition DELETE TITLE Change 1 1 TITLE ZOBEC. ALPHONSUS F. NAME 1.2 NAME 2579 CEDARCREST RD STREET ADDRESS. 1.3 STREET ADDRESS W PALM BCH FL 33415 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change \_\_\_ Addition ZOBEC, SHERIE NAME 2.2 NAME 2579 CEDARCREST RD STREET ADDRESS 2.3 STREET ADDRESS W PALM BCH FL 33415 CITY-ST-ZIP 2.4 CITY - ST- ZIP DELETE TITLE Change Addition 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE TITLE 51 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 54 CITY-ST-ZIP DELETE TITLE Addition 61 TITLE Change NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZP 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name