

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G18882

FILED
Apr 30, 2003
Secretary of State

Entity Name: GOLD COAST INTERIORS, INC.

Current Principal Place of Business:

10145 NW 19TH ST
MIAMI, FL 33172 US

New Principal Place of Business:

405 SW 148TH AVE.
DAVIE, FL 33325 US

Current Mailing Address:

10145 NW 19TH ST
MIAMI, FL 33172 US

New Mailing Address:

405 SW 148TH AVE.
DAVIE, FL 33325 US

FEI Number: 59-2308812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALAMIDA, MARTY
10145 NW S19TH ST.
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

SALAMIDA, MARTY
405 SW 148TH AVE.
DAVIE, FL 33325 US

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.

SIGNATURE:

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SALAMIDA, MARTY,
Address: 10145 NW 19TH ST
City-St-Zip: MIAMI, FL 33172

Title: ST () Delete
Name: SALAMIDA, BARBARA,
Address: 10145 NW 19TH ST
City-St-Zip: MIAMI, FL 33172

Title: VP () Delete
Name: BURKE, ANTHONY J
Address: 15131 SW 145 ST
City-St-Zip: MIAMI, FL 33146

Title: VP () Delete
Name: NENAMKIN, GIL J
Address: 3807 PINE LAKE DR
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALAMIDA, MARTY,
Address: 405 SW 148TH AVE.
City-St-Zip: DAVIE, FL 33325

Title: ST (X) Change () Addition
Name: SALAMIDA, BARBARA,
Address: 405 SW 148TH AVE.
City-St-Zip: DAVIE, FL 33325

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTY SALAMIDA

P

04/30/2003

Electronic Signature of Signing Officer or Director

Date