

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # H68198 (1)

1. Corporation Name

COASTAL AUTO SALES OF PALM BEACH, INC.

Principal Place of Business

Mailing Address

1602 N DIXIE HWY  
LAKE WORTH FL 33460

1602 N DIXIE HWY  
LAKE WORTH FL 33460



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MILICI, HENRY  
7402 HAZELWOOD CIRCLE  
LK. WORTH FL 33467

3. Date Incorporated or Qualified  
07/25/1985

3a. Date of Last Report  
03/14/1995

4. FEI Number  
59-2551685

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 state if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS ☐ DELETE

NAME MILICI, GINA  
STREET ADDRESS 1602 N DIXIE HWY  
CITY - ST - ZIP LAKE WORTH FL

TITLE VTD ☐ DELETE

NAME MILICI, HENRY  
STREET ADDRESS 7402 HAZELWOOD C  
CITY - ST - ZIP LAKE WORTH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

NAME GINA Milici  
STREET ADDRESS 1602 N. DIXIE HWY  
CITY - ST - ZIP LAKE WORTH FL

2.1 TITLE ☒ Change ☐ Addition

NAME HENRY Milici  
STREET ADDRESS 7402 HAZELWOOD C.  
CITY - ST - ZIP LAKE WORTH FL

3.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY - ST - ZIP

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 119.07(3)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)