2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000016656

FILED Sep 13, 2006 Secretary of State

Entity Name: COASTWIDE DISASTER RELIEF & RECOVERY, LLC

Current Principal Place of Business: New Principal Place of Business:

8666 SEMINOLE BLVD. 2840 WEST BAY DRIVE

SEMINOLE, FL 33772 #288

BELLEAIR BLUFFS, FL 33770

Current Mailing Address: New Mailing Address:

8666 SEMINOLE BLVD. 2840 WEST BAY DRIVE

SEMINOLE, FL 33772 #288

BELLEAIR BLUFFS, FL 33770

FEI Number: 20-2356460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KEWE UNLIMITED, INC.

8666 SEMINOLE BLVD.

SEMINOLE, FL 33772 US

KEWE UNLIMITED, INC.

2401 WEST BAY DRIVE

SUITE 124

LARGO, FL 33770 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: THERESA L. WEBER 09/13/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition
Name: COASTWIDE CAPITAL MA, NAGEMENT, LLC Name: COASTWIDE CAPITAL MA, NAGEMENT, LLC

Address: 8666 SEMINOLE BLVD. Address: 2401 WEST BAY DRIVE, SUITE 124

City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: LARGO, FL 33770

Title: MGRM () Delete Title: () Change () Addition

 Name:
 VINET INVESTMENT GRO, UP, LLC.
 Name:

 Address:
 5308 BOB ACRES ROAD
 Address:

 City-St-Zip:
 DELCAMBRE, LA 70528
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MIGUEZ INVESTMENT GR, OUP, LLC
 Name:

 Address:
 406 SOUTH PRESIDENT
 Address:

 City-St-Zip:
 DELCAMBRE, LA 70528
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THERESA L. WEBER MGR 09/13/2006