

Apr 18 05 01:01p

352-483-1111

P. 2
10/2

FILED

05 APR 25 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L61084

1. Entity Name
COINAIR, INC.



Principal Place of Business
36720 NASHUA BLVD
SORRENTO, FL 32776 US

Mailing Address
36720 NASHUA BLVD
SORRENTO, FL 32776 US

4/21/04 90035024-



04182005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3009462

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUE, TERESA E
36720 NASHUA BLVD.
SORRENTO, FL 32776

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
RUE, TERESA E
36720 NASHUA BLVD.
SORRENTO, FL 32776

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE

12. I 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 report or supplemental 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 person authorized to report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with address, with a

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Date

Daytime Phone #

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Zeel

COINAIR INC.
36720 NASHUA BLVD.
SORRENTO, FL 32776-8415
TEL: (352) 357-5050
FAX: (352) 483-1111

FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
Michelle Milligan	Terry Rue
COMPANY:	DATE:
Fla Dept of State	04/18/05
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
850-245-6017	2
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
RE: ANNUAL REPORT	YOUR REFERENCE NUMBER:

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐

Confirming our telephone conversation a few weeks ago, I am forwarding the 2005 Annual Report for Coinair Inc. Please apply \$150.00 of my overpayment to the annual fee due May 1, 2005 and refund the balance.

My overpayment should be: \$673.25

Less fee

Balance due me

(150.00) 04 report + 150.00 05 report

~~523.25~~ 373.25

[Signature]

[Signature]