

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L99498

FILED  
Feb 28, 2005  
Secretary of State

Entity Name: COASTAL AUTOMOTIVE EQUIPMENT SALES, INC.

**Current Principal Place of Business:**

983 12TH ST  
A  
VERO BEACH, FL 32960 US

**New Principal Place of Business:**

**Current Mailing Address:**

983 12TH ST  
A  
VERO BEACH, FL 32960 US

**New Mailing Address:**

FEI Number: 65-0215302      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAMMARTINO, ALFRED  
983 12TH STREET  
VERO BEACH, FL 32960 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: SAMMARTINO, ALFRED  
Address: 502 TULIP LANE  
City-St-Zip: VERO BEACH, FL

Title: P ( ) Delete  
Name: SAMMARTINO, BETTY J  
Address: 502 TULIP LANE  
City-St-Zip: VERO BEACH, FL

Title: V ( ) Delete  
Name: SAMMARTINO, MARK D  
Address: 535 31ST AVE  
City-St-Zip: VERO BEACH, FL 32968

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SAMMARTINO, ALFRED  
Address: 502 TULIP LANE  
City-St-Zip: VERO BEACH, FL

Title: S (X) Change ( ) Addition  
Name: SAMMARTINO, BETTY J  
Address: 502 TULIP LANE  
City-St-Zip: VERO BEACH, FL

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: B.J. SAMMARTINO

S

02/28/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date