

FILE NOW: FILING FEE AFTER MAY 1 IS \$100

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandia B. M.
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29 1996 8:00 am
Secretary of State

DOCUMENT # M84663 (7)

1. Corporation Name

COASTAL TEXTILES INC.

Principal Place of Business

1090 E 17TH ST
HIALEAH FL 33010

Mailing Address

1090 E 17TH ST
HIALEAH FL 33010

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

30

9. Name and Address of Current Registered Agent

TARGOFF, CARL
77 SPINNAKER
FT. LAUDERDALE FL 33326

3. Date Incorporated or Qualified

06/09/1988

3a. Date of Last Report

05/01/1995

4. FEI Number

13-3468110

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

Name

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

City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, this 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 that of applicant

(NOTE: Re-

Signature required of incorporator(s)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

☐ DELETE

NAME

TARGOFF, CARL

STREET ADDRESS

77 SPINNAKER

CITY-ST-ZIP

FT. LAUDERDALE FL

TITLE

D

☐ DELETE

NAME

RAND, ROGER

STREET ADDRESS

1515 WEST 22ND STREET

CITY-ST-ZIP

MIAMI BEACH 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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and not qualified 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 of the corporation; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

CARL TARGOFF
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 305-888-8060
Date Date of Filing

CR2E034 (12/95)