

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2002 8:00 am
Secretary of State

01-28-2002 90058 037 ***150.00

DOCUMENT # P01000010620

1. Entity Name
FIRST COAST C & G, INC.

Principal Place of Business

Mailing Address

~~4815 EXECUTIVE PARK CT, STE 201~~
~~JACKSONVILLE FL 32216~~

~~4815 EXECUTIVE PARK CT, STE 201~~
~~JACKSONVILLE FL 32216~~

2. Principal Place of Business

3. Mailing Address

4876 VICTOR ST

4876 VICTOR ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

JACKSONVILLE FL

City & State

JACKSONVILLE FL

4. FEI Number

59-3695384

Applied For

Not Applicable

Zip

32207

Country

FLORIDA

Zip

32207

Country

FLORIDA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WANG, STEPHEN Y

~~4815 EXECUTIVE PARK CT, STE 201~~
~~JACKSONVILLE FL 32216~~

Name

WANG, STEPHEN Y

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

4876 VICTOR ST

City

JACKSONVILLE

FL

Zip Code

32207

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☒
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **D**
WANG, STEPHEN Y
 STREET ADDRESS ~~4815 EXECUTIVE PARK CT, STE 201~~
 CITY-ST-ZIP ~~JACKSONVILLE FL 32216~~

TITLE ☒ Change ☐ Addition
 NAME **D**
WANG, STEPHEN Y
 STREET ADDRESS **4876 VICTOR ST.**
 CITY-ST-ZIP **JACKSONVILLE FL 32207**
 Address change

TITLE ☐ Delete
 NAME **D**
WANG, JAMES Y
 STREET ADDRESS **5329-C POWERS AVE**
 CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEPHEN Y. WANG

Date

Daytime Phone #

1-15-02 904-733-9397

CR20034 (9/01)