


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 23, 2004 8:00 am**  
**Secretary of State**

04-23-2004 90252 040 \*\*\*158.75

|   |   |  |  |   |  |
|---|---|--|--|---|--|
| <b>DOCUMENT # P01000012052</b><br>1. Entity Name<br><b>COASTAL SHOTCRETE INC.</b>   |   |  |  |    |  |
| Principal Place of Business<br><b>3445 PINEHURST DR<br/>HOLIDAY FL 34691</b>  |   |  | Mailing Address<br><b>3445 PINEHURST DR<br/>HOLIDAY FL 34691</b>   |   |  |
| 2. Principal Place of Business<br><br>Suite, Apt. #, etc.   |   |  | 3. Mailing Address<br><br>Suite, Apt. #, etc.  |   |  |
| City & State  |   |  | City & State   |   |  |
| Zip   |   | Country                                    |  | Zip   |  |
| Country   |   | Country                                    |  | 4. FEI Number<br><b>59-3700657</b>  |  |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>  |   |  |  | Applied For<br><input type="checkbox"/> Not Applicable  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>SEREDA, MICHAEL J<br/>3445 PINEHURST DR<br/>HOLIDAY FL 34691</b>  |   |  |  | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |  |
| 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.<br><br>SIGNATURE <u><i>Michael Sereda</i></u> <b>MICHAEL SEREDA</b> <u>04-20-04</u><br><small>Signature of person or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>   |   |  |  |   |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2004, Fee will be \$550.00</b><br><b>Make Check Payable to Florida Department of State</b>  |   |  | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |   |  |
| 10. OFFICERS AND DIRECTORS  |   |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | D<br>SEREDA, MICHAEL J<br>3445 PINEHURST DR<br>HOLIDAY FL 34691   | <input type="checkbox"/> Delete            |  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | S<br>SERZOA, STEVE<br>5241 COURTLAND RD.<br>SPRING HILL FL 34608  | <input checked="" type="checkbox"/> Delete |  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | T<br>ALCANTARA, CHRISTIAN<br>5608 E. 130TH AVE.<br>TAMPA FL 33617 | <input checked="" type="checkbox"/> Delete |  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <br><br><br>  | <input type="checkbox"/> Delete            |  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <br><br><br>  | <input type="checkbox"/> Delete            |  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <br><br><br>  | <input type="checkbox"/> Delete            |  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <br><br><br>  | <input type="checkbox"/> Delete            |  |   |  |
| 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 receiver or trustee empowered to execute this 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 an address, with all other like empowered. |   |  |  |   |  |
| SIGNATURE: <u><i>Michael Sereda</i></u> <b>MICHAEL SEREDA</b> <u>042004 (727)5600505</u><br><small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>   |   |  |  |   |  |



MOORE CR2E034 (11/03)