


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90025 036 ***150.00

DOCUMENT # P01000015205	
1. Entity Name COASTAL WELDING & IRONWORKS, INC.	

Principal Place of Business 23F HARGROVE GRADE PALM COAST, FL 32137	Mailing Address 23F HARGROVE GRADE PALM COAST, FL 32137
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DO NOT WRITE IN THIS SPACE

01122004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3697745	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DEMARTINO, MARIA 32 KANKAKEE TRAIL PALM COAST, FL 32164 <i>26 Brockton Lane Palm Coast, Fla 32137</i>
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES DEMARTINO, MARIA 32 KANKAKEE TRAIL PALM COAST, FL 32164 <i>26 Brockton Lane Palm Coast, Fla 32137</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MITCHELL, WILLIAM 32 KANKAKEE TRAIL PALM COAST, FL 32164 <i>26 Brockton Lane Palm Coast, Fla 32137</i>
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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: *Maria De Martino* **DEMARTINO** *2/10/04* *Bus# 386-447-7446* *H.M.B 386-446-6003*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR