L Entity Name	0019868			Sep 03, 20 Secretar 09-03-2002 901		
GOLD COAST PLASTERING & STUC	CO, INC.			09-03-2002 901	102 050 1.	0.00
Principal Place of Business 1815 NW 64TH WAY MARGATE FL 33063	Mailing Address 1815 NW 64TH WAY MARGATE FL 33063	<u></u>				
Principal Place of Business	3. Mailing Address		_			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			1 DO NOT WRITE IN		
City & State	City & State	<u></u>				pplied For
Zip Country	Zip	Country		65-1083416	<b>*0 75</b>	ot Applicable
6. Name and Address of Current Re	••••			Certificate of Status Desired	Fee Require	ed
	- area of Anti	Name	<u>. N</u>	and Address of New Regist	ereu Agent	
KRIZ, JIM 1815 NW 64TH WAY		Street Addres	s (P.O. B	ox Number is Not Acceptable)		
MARGATE FL 33063						
-1		City			FL Zip Coo	le i
The above named entity submits this statement for the obligations of registered agent.	he purpose of changing it	ts registered office or regis	tered age			and accept
GNATURE	d title if applicable. (NO	TE: Registered Agent signature requ	red when rei	nstating)	DATE	
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After September 1	7111 FEE IS \$550.00 3, 2002 Fee will be \$75 able to Department of S	0.00	10. Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees
Tax filing requirement and elects to do so. (See criteria on back) OFFICERS AND DI	After September 1 Make Check Paya	3, 2002 Fee will be \$75 ble to Department of S	i0.00 tate		Adde	d to Fees S IN 11
Tax filing requirement and elects to do so. (See criteria on back)  CFFICERS AND DI  LE  DP  ME  KRIZ, TERRI 1815 NW 64TH WAY	After September 1 Make Check Paya	3, 2002 Fee will be \$75 ble to Department of S 12. TITLE NAME STREET ADDRESS	i0.00 tate	Trust Fund Contribution.	Addeo	d to Fees
Tax filing requirement and elects to do so.         (See criteria on back)         OFFICERS AND DI         LE       DP         KRIZ, TERRI         1815 NW 64TH WAY         Y-ST-ZIP         MARGATE FL 33063         LE       DV         KRIZ, JIM	After September 1 Make Check Paya	3, 2002 Fee will be \$75 ble to Department of S 12. ITILE NAME	i0.00 tate	Trust Fund Contribution.	Adde	d to Fees S IN 11
Tax filing requirement and elects to do so. (See criteria on back)       OFFICERS AND DI         LE       DP         KRIZ, TERRI         1815 NW 64TH WAY         MARGATE FL 33063         LE       DV         KRIZ, JIM         1815 NW 64TH WAY         MARGATE FL 33063         LE       DV         KRIZ, JIM         1815 NW 64TH WAY         MARGATE FL 33063	After September 1 Make Check Paya	3, 2002 Fee will be \$75 bie to Department of S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	i0.00 tate	Trust Fund Contribution.	Adder	d to Fees
Tax filing requirement and elects to do so. (See criteria on back)       OFFICERS AND DI         Le       DP         ME       KRIZ, TERRI         1815 NW 64TH WAY         Y-ST-ZIP       MARGATE FL 33063         LE       DV         KRIZ, JIM         REET ADDRESS       1815 NW 64TH WAY	After September 1 Make Check Paya	3, 2002 Fee will be \$75 able to Department of S 12. 11TLE NAME STREET ADDRESS CITY-ST-ZIP 11TLE NAME STREET ADDRESS	i0.00 tate	Trust Fund Contribution.	Adder	d to Fees
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Tax filing requirement and elects to do so. (See criteria on back)       OFFICERS AND DI         UE       DP         KRIZ, TERRI         1815 NW 64TH WAY         Y-ST-ZIP         MARGATE FL 33063         LE         DV         KRIZ, JIM         KRET ADDRESS         Y-ST-ZIP         MARGATE FL 33063         LE         DV         KRIZ, JIM         1815 NW 64TH WAY         Y-ST-ZIP         MARGATE FL-33063         LE         DT         KRIZ, JESSE         1815 NW 64TH WAY         Y-ST-ZIP         MARGATE FL 33063         LE         DT         KRIZ, JESSE         1815 NW 64TH WAY         Y-ST-ZIP         MARGATE FL 33063         LE         DS         PETERESON, RON         EET ADDRESS         1815 NW 64TH WAY	After September 1 Make Check Paya	3, 2002 Fee will be \$75 bit to Department of S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	i0.00 tate	Trust Fund Contribution.	Adden	d to Fees S IN 11 Addition Addition Addition

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GOLD COAST PLASTERING & STUCCO, INC. 1815 NW 64<sup>TH</sup> WAY MARGATE, FL 33063

August 26, 2002

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- Florida Department of State Division of Corporations
- P.O. Box 1500 Tallahassee, FL 32302-1500
  - RE: Uniform Business Report Year: 2002

To Whom It May Concern:

Please be advised that we just received this in the mail a few weeks ago. I wasn't sure what to do because this is the first notification that we received. I am enclosing the amount of \$150.00 and would like to request that it be accepted due to the fact that we have not received any notification before this one.

Thank you for your consideration in the matter.

Sincerely,

Terri Lee Kriz President