

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000019868

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: GOLD COAST PLASTERING & STUCCO, INC.

## Current Principal Place of Business:

500 LOCK RD  
STE 6  
DEERFIELD BEACH, FL 33442

## New Principal Place of Business:

1815 NW 64TH WAY  
MARGATE, FL 33063

## Current Mailing Address:

500 LOCK RD  
STE 6  
DEERFIELD BEACH, FL 33442

## New Mailing Address:

1815 NW 64TH WAT  
MARGATE, FL 33063

FEI Number: 65-1083416

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KRIZ, JIM  
500 LOCK RD  
ST E6  
DEERFIELD BEACH, FL 33442 US

## Name and Address of New Registered Agent:

KRIZ, JIM A  
1815 NW 64TH WAY  
MARGATE, FL 33063 US

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: JIM KRIZ

01/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVTD ( ) Delete  
Name: KRIZ, JIM  
Address: 500 LOCK RD STE, 6  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SD ( ) Delete  
Name: PETERESON, RON  
Address: 500 LOCK RD, STE 6  
City-St-Zip: DEERFIELD BEACH, FL 33442

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTD (X) Change ( ) Addition  
Name: KRIZ, JIM A  
Address: 1815 NW 64TH WAY  
City-St-Zip: MARGATE, FL 33063

Title: SD (X) Change ( ) Addition  
Name: PETERESON, RON  
Address: 1815 NW 64TH WAY  
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM A KRIZ

P

01/09/2007

Electronic Signature of Signing Officer or Director

Date