

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000056976

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Entity Name:** SUNCOAST TROPICAL PROMOTIONS, INC.

**Current Principal Place of Business:**

4230 OAKHURST CIRCLE EAST  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**

4230 OAKHURST CIRCLE EAST  
SARASOTA, FL 34233

**New Mailing Address:**

5630 HAMMOCK LANE  
LAUDERHILL, FL 33319

**FEI Number:** 65-1125991

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COHEN, MARCUS J  
4230 OAKHURST CIRCLE EAST  
SARASOTA, FL 34233 US

**Name and Address of New Registered Agent:**

COHEN, MARCUS J  
5630 HAMMOCK LANE  
LAUDERHILL, FL 33319 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:

02/23/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: COHEN, MARCUS J  
Address: 5630 HAMMOCK LANE  
City-St-Zip: LAUDERHILL, FL 33319

I hereby 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 all other like empowered.

SIGNATURE: MARCUS J COHEN

D

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date