## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000083230 DOCUMENT #

1. Entity Name

COAST TO COAST MARKETING GROUP, INC.



**FILED** Apr 30, 2003 8:00 am Secretary of State

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Sulfe. Apt. #, etc.   Suite Apt. #, etc.   Suite Apt. #, etc.   City & State   4. FEI Number 65-1133230   Applicable For Kod Applicable   St. Capillocable   Applicable   St. Capillocable   St. Capillocab	3801 N UNIVERSITY DRIVE SUITE 313 3801 N UNIVERSITY DRIVE SUITE 313													
City & State  Ci	2. Principal Place of Business 3. Mailing Address							<b>181</b> 111 <b>11</b> 111111111111111111111111111		UP <b>39</b> 00 <b>0006</b> 1 1	9188 (INIE 1488 <b>)</b>			
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S. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  8. The above named entity submits this statement for the purpose of changing its registered agent, or both; in the State of Florida. I am familiar vein; and accept the obligations of registered agent, or both; in the State of Florida. I am familiar vein; and accept the obligations of registered agent.  SIGNATURE  Signature the companies where a private done displatines agent and life it populsors.  FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILE  REFERENCE  SIMEST AUGUSS  GREENSTEIN, LENNY  SIMEST AUGUSS  OITY ST.2P  TILE  VD  BOX NOSSKY, RICHARD  SIMEST AUGUSS  SIMEST AUGUSS  OITY ST.2P  TILE  NAME  SIMEST AUG	City & Star	te		City	& State			4	. FEI N	lumber 65-1	133230			
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GREENSTEIN, LENNY 4051 NW 84 TERRACE SUNRISE FL 33351  City FL ZIP Code  City FL ZIP Code  City FL ZIP Code  6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the octigations of registered agent.  SIGNATURE  FILE NOWILL FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  MAKE SIGNATURE  GREENSTEIN, LENNY  GREENSTEIN, LENN		6. Name a	nd Address o	f Current Registere	ed Agent			7.	. Name	and Address	s of New R	legistered .	Agent	
4051 NW 84 TERRACE SUNRISE FL 33351  City FL Zip Code  City FL Zip	-	-	:		-		Name							
A051 NW 64 TERRACE SUNRISE FL 33351  City FL Zip Code  City FL Zip	GREENST	EIN, LENNY												
SUNNISE FL 33351  8. The above named entity submits this statement for the purpose of changing its registrated diffice or registrated agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registrated agent agent and title it epilopathic.    SIGNATURE	4051 NW	84 TERRACE	·				i Street Add	iress (P.O.	. BOX INI	umber is not i	Acceptable	")		İ
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After May 1, 2003 Fee will be \$550.00 Make Check Payable to FlorIda Department of State  10.	SIGNATURE	Signature, typed or	printed name of regi	stered agent and title if app	olicable. (NOTE	: Registered	d Agent signature	required whe	n reinstatin	ng)		DATE		
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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>Zidereouired</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR