

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000118184

FILED  
Aug 31, 2007  
Secretary of State

Entity Name: COASTAL CONVERTIBLES, INC.

**Current Principal Place of Business:**

736 NW 57TH ST  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

5470 NW 41ST TERRACE  
BOCA RATON, FL 33496 US

**Current Mailing Address:**

5470 NW 41ST TER  
BOCA RATON, FL 33496

**New Mailing Address:**

FEI Number: 02-0536947      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MURDOCH, ROBERT E  
790 EAST BROWARD BLVD STE 400  
FT LAUDERDALE, FL 33301 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PACE, STEVEN S  
Address: 5470 NW 41ST TER  
City-St-Zip: BOCA RATON, FL 33496

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN PACE

D

08/31/2007

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

\_\_\_\_\_  
Date