

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000043853

FILED
Apr 06, 2009
Secretary of State

Entity Name: SUNCOAST DESIGN SERVICES INC.

Current Principal Place of Business:

1211 N WESTSHORE BLVD
SUITE 500
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

1211 N WESTSHORE BLVD
500
TAMPA, FL 33607

New Mailing Address:

FEI Number: 04-3649689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOROUGH, MASOUD
21219 SKY VISTA DRIVE
LAND O' LAKES, FL 34637 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOROUGH, MASOUD
Address: 21219 SKY VISTA DRIVE
City-St-Zip: LAND O' LAKES, FL 34637

Title: VSD () Delete
Name: BEUCKENS, PAUL A
Address: 10234 TARPON DRIVE
City-St-Zip: TREASURE ISLAND, FL 33706 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: FOROUGH, MASOUD
Address: 21219 SKY VISTA DRIVE
City-St-Zip: LAND O' LAKES, FL 34637

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: MASOUD FOROUGH

P

04/06/2009

Electronic Signature of Signing Officer or Director

Date