

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000112980

Entity Name: AMBERGRIS CAY EXPORTS INC.

FILED  
Aug 10, 2004  
Secretary of State

## Current Principal Place of Business:

C/O COASTAL SYSTEME INTERNATIONAL INC.  
464 S DIXIE HWY  
CORAL GABLES, FL 33146

## Current Mailing Address:

C/O COASTAL SYSTEME INTERNATIONAL INC.  
464 S DIXIE HWY  
CORAL GABLES, FL 33146

## New Principal Place of Business:

C/O COASTAL SYSTEMS INTERNATIONAL INC.  
464 S DIXIE HWY  
CORAL GABLES, FL 33146

## New Mailing Address:

C/O COASTAL SYSTEMS INTERNATIONAL INC.  
464 S DIXIE HWY  
CORAL GABLES, FL 33146

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MENSEN, HENRY  
C/O COASTAL SYSTEME INTERNATIONAL INC.  
464 S DIXIE HWY  
CORAL GABLES, FL 33146

## Name and Address of New Registered Agent:

MENSEN, HENRY  
C/O COASTAL SYSTEMS INTERNATIONAL INC.  
464 S DIXIE HWY  
CORAL GABLES, FL 33146

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:

08/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MENSEN, HENRY  
Address: 1509 SE 2ND ST #F  
City-St-Zip: FT LAUDERDALE, FL 33301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MENSEN, HENRY  
Address: 904 NE 16TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33304

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HENRY MENSEN

D

08/10/2004

Electronic Signature of Signing Officer or Director

Date