


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90012 031 ***158.75

DOCUMENT # P02000121737	
1. Entity Name GULF COAST METAL WORKS, INC.	

Principal Place of Business 1228 VISCAYA PKWY UNIT B CAPE CORAL, FL 33990	Mailing Address 1228 VISCAYA PKWY UNIT B CAPE CORAL, FL 33990
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40063520



01212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 55-0804724	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KAYUSA, MICHAEL F ESQ 1922 VICTORIA AVE SUITE A 2400 1ST ST #303 FORT MYERS, FL 33901
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P CRUMPLER, BARRY 1119-B SE 12TH CT CAPE CORAL, FL 33990
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V MESLER, TIMOTHY 1119-B SE 12TH CT CAPE CORAL, FL 33990
TITLE NAME STREET ADDRESS CITY- ST- ZIP	ST CRUMPLER, BRANDI 1119-B SE 12TH CT CAPE CORAL, FL 33990
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 or without like empowered.

SIGNATURE: 	3-17-08	3-17-08
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>