


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P03000068422		
1. Entity Name COAST RESTAURANT EQUIPMENT INC		
Principal Place of Business 2438 MANATEE AVE EAST BRADENTON, FL 34208 US		Mailing Address 9210 13TH AVE CIRCLE NW BRADENTON, FL 34209 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BELAGA, MARGO A 9210 13TH AVE CIRCLE NW BRADENTON, FL 34209		DO NOT WRITE IN THIS SPACE
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>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		000000115248 04/16/04-80015-025 150.00
TITLE	PRES	DO NOT WRITE IN THIS SPACE
NAME	LACROIX, EDMOND B	
STREET ADDRESS	9210 13TH AVE CIRCLE NW	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	VP	
NAME	BELAGA, MARGO A	
STREET ADDRESS	9210 13TH AVE CIR NW	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE		DO NOT WRITE IN THIS SPACE
NAME		
STREET ADDRESS		
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TITLE		DO NOT WRITE IN THIS SPACE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4/13/04 Daytime Phone # 941-708-7000