

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000117442

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Entity Name:** GULF COAST DESIGN PRODUCTS, INC.

**Current Principal Place of Business:**

170 AIRPARK BOULEVARD  
IMMOKALEE, FL 34142

**New Principal Place of Business:**

**Current Mailing Address:**

3705 WESTVIEW DRIVE  
UNIT # 2  
NAPLES, FL 34104

**New Mailing Address:**

**FEI Number:** 20-0423071

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIAZ, CARLOS A  
3705 WESTVIEW DRIVE  
UNIT # 2  
NAPLES, FL 34104 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

**OFFICERS AND DIRECTORS:**

Title: D/P  
Name: DIAZ, CARLOS A  
Address: 3705 WESTVIEW DRIVE UNIT # 2  
City-St-Zip: NAPLES, FL 34104

Title: D/V  
Name: DIAZ, MARIA D  
Address: 3705 WESTVIEW DRIVE UNIT # 2  
City-St-Zip: NAPLES, FL 34104

Title: D/ST  
Name: DIAZ, EDELMIRA  
Address: 3705 WESTVIEW DRIVE UNIT # 2  
City-St-Zip: NAPLES, FL 34104

I hereby 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 all other like empowered.

SIGNATURE: CARLOS A. DIAZ

D/P

04/19/2012

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

\_\_\_\_\_  
Date