2005 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT	Apr 25, 2005 08:00 A
DOCUMENT # P03000151789 1. Entity Name GOLD COAST HOME INSPECTION SERVICES, INC.	Secretary of State
Principal Place of Business. — — Mailing Address 1152 HIDDEN VALLEY WAY WESTON, FL 33327 — WESTON, FL 33327	(DENIGO) III DOLDE NIM DEMI DENIGENIA MORI MINI MAM MAREL MINE RINERE NI REL
DO NOT WRITE IN THIS SPACE	02112005 No Chg-P CR2E034 (10/03) 4. FEI Number
6. Name and Address of Current Registered Agent	
SPIEGEL & UTRERA, P.A. 1840 SW 22 ST 4 FLR MIAMI, FL 33145	DO NOT WRITE IN THIS SPACE
 The above named entity submits this statement for the purpose of changing its registered office or rethe obligations of registered agent. 	egistered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature typed or priviled name of registered agent and title it applicable (NOTE. Registered Agent signature	required when reinstatur.g) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10. OFFICERS AND DIRECTORS	
TITLE DPST NAME DEPALO, RICHARD W STREET ADDRESS 1152 HIDDEN VALLEY WAY CITY-ST-ZIP WESTON, FL 33327	U00000326714 04/25/05-80009-010 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY - ST- ZIP	_ DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SY-ZIP	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated indicated on this report or supplemental report is true and accurate and that my signature shall have of the corporation or the receiver or trustee empowered to execute this report as required by Chaptichanged, or on an attachment with an address, with all other like empowered.	e the same legal effect as it made under gath; that I am an officer or director 1
SIGNATURE: FM W LIEU SIGNING OFFICER OR DIRECTOR	Date Dayline Phone #