2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# P04000015675

Entity Name: INTERCOASTAL FLORIDA SERVICE, INC.

Current Principal Place of Business:

243 HILLVIEW ROAD
VENICE, FL 34293

New Principal Place of Business:

2211 CHENILLE CT
VENICE, FL 34292

Current Mailing Address:

243 HILLVIEW ROAD
VENICE, FL 34293

New Mailing Address:

2211 CHENILLE CT
VENICE, FL 34292

FEI Number: 20-0666830 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MUNOZ, SANDRO G
243 HILLVIEW ROAD
VENICE, FL 34293 US

Name and Address of New Registered Agent:

MUNOZ, SANDRO G
2211 CHENILLE CT
VENICE, FL 34292 US

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: _____ 04/30/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MUNOZ, SANDRO G
Address: 243 HILLVIEW ROAD
City-St-Zip: VENICE, FL 34293

Title: STD ( ) Delete
Name: CARLINI, JACQUELINE B
Address: 243 HILLVIEW ROAD
City-St-Zip: VENICE, FL 34293

Title: D (X) Delete
Name: CARLINI, AMERICO J
Address: 243 HILLVIEW ROAD
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MUNOZ, SANDRO G
Address: 2211 CHENILLE CT
City-St-Zip: VENICE, FL 34292

Title: STD (X) Change ( ) Addition
Name: CARLINI, JACQUELINE B
Address: 2211 CHENILLE CT
City-St-Zip: VENICE, FL 34292

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JACQUELINE B CARLINI SECR 04/30/2007
Electronic Signature of Signing Officer or Director — Date