

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000031171

FILED
Aug 31, 2005
Secretary of State

Entity Name: COASTAL DEVELOPMENT CONSULTANTS, INC.

Current Principal Place of Business:

6280 SW 82 ST
MIAMI, FL 33143

New Principal Place of Business:

7800 RED ROAD
SUITE 218
MIAMI, FL 33143

Current Mailing Address:

6280 SW 82 ST
MIAMI, FL 33143

New Mailing Address:

FEI Number: 42-1621797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, JAMES
6280 SW 82 ST
MIAMI, FL 33143 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: PT () Delete
Name: ROBINSON, JAMES
Address: 6280 SW 82 ST
City-St-Zip: MIAMI, FL 33143

Title: VPS (X) Delete
Name: CALVO, JOSE
Address: 6280 SW 82 ST
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: ROBINSON, JAMES
Address: 6280 SW 82 ST
City-St-Zip: MIAMI, FL 33143

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES ROBINSON

PTSD

08/31/2005

Electronic Signature of Signing Officer or Director

Date