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May 07, 2008 8:00 am
Secretary of State

05-07-2008 90106 033 ***150.00

2008

**FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000048191

1. Entity Name
PACIFIC COAST TRANSPORTATION, INC.



40098618

Principal Place of Business

706 COMMERCE WAY #7
JUPITER, FL 33458

Mailing Address

706 COMMERCE WAY #7
JUPITER, FL 33458

2. Principal Place of Business

3. Mailing Address



06262006

Chg-P

CN2E034 (11/05)

4. FIC Number
36-4314567

5. Certificate of Status Desired
☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KULON, ANDREW
706 COMMERCE WAY #7
JUPITER, FL 33458

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. The above named entity certifies the 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

Signature of Registered Agent (Required for all registered agents)

DATE: Registered Agent Signature Required after 1/1/2008

DATE

FILE NOW!!! FEE IS \$350.00
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KULON, ANDREW	NAME	
STREET ADDRESS	706 COMMERCE WAY #7	STREET ADDRESS	
CITY-ST-ZIP	JUPITER, FL 33458	CITY-ST-ZIP	
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KULON, MARY	NAME	
STREET ADDRESS	706 COMMERCE WAY #7	STREET ADDRESS	
CITY-ST-ZIP	JUPITER, FL 33458	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-08

ATTACHMENT
40098618
POS000048191

PACIFIC COAST TRANSPORTATION, INC. 05/04 PO BOX 275 PHONE (815) 445-2252 MANLIUS, IL 61338		7532 70-248711
Pay to the Order of	<i>Florida Dept of State</i>	4-24-08 Date
<i>One hundred fifty & 00/100</i> Dollars		\$ 150.00
SHEFFIELD BANKING CENTER OF PEOPLES NATIONAL BANK OF KENNESAW SHEFFIELD, IL 61361		
For	<i>36-4314567</i>	<i>W. J. Kell</i>

5-6-08

ATTACHMENT
40098618
#P05000048191

TO WHOM IT MAY CONCERN.

I enclosed a copy of a check
that was made to you on 4-24-08
that you never received.

Sincerely,
Mangal.