2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163746

City-St-Zip:

Entity Name: COASTAL INTERIOR CONSTRUCTION, INC.

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
2620 NE 5 POMPANO	TH AVE D BEACH, FL	33064				
Current Mailing Address:			New Maili	New Mailing Address:		
2620 NE 5 POMPANO	TH AVE D BEACH, FL	33064				
FEI Number:	: 74-3155193	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired (X)	
Name and	Address of	Current Registered Agent:	Name and	Address o	of New Registered Agent:	
2620 NE 5 POMPANO	D BEACH, FL		ournoso of changing i	ite registere	d office or registered agent, or both,	
	e of Florida.	Submits this statement for the p	purpose of changing i	its registere	d office of registered agent, or both,	
SIGNATU	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Car	npaign Financir	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	MOSS-LIEFER 4115 NW 59TH		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	MESLIN, E. JC	RHILL LN - UNIT 8	Title: Name: Address: City-St-Zip:		(X) Change () Addition JOHN HERHILL LN - UNIT 8 DN, FL 33486	
Title: Name: Address: City-St-Zip:	MESLIN, E. JC	RHILL LN - UNIT 8	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	() Delete	Title: Name: Address:	T ZAZESKI, D 4007 CARL	() Change (X) Addition AVID A BOLTER DRIVE	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: ILENE MOSS-LIEFER PRES 01/04/2007

DELRAY BEACH, FL 33444