

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000106454

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** COASTAL AUDIO VIDEO INC.

**Current Principal Place of Business:**

3522 RENAULT CIRCLE  
NORTH PORT, FL 34286 US

**New Principal Place of Business:**

6321 PORTER ROAD SUITE 4  
SARASOTA, FL 34240 US

**Current Mailing Address:**

3522 RENAULT CIRCLE  
NORTH PORT, FL 34286 US

**New Mailing Address:**

6321 PORTER ROAD SUITE 4  
SARASOTA, FL 34240 US

**FEI Number:** 26-1135046

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GIUFFRE, FRANK  
3422 RENAULT CIRCLE  
NORTH PORT, FL 34291 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:** PVST  
**Name:** GIUFFRE, FRANK  
**Address:** 3522 RENAULT CIRCLE  
**City-St-Zip:** NORTH PORT, FL 34286 US

**Title:** D  
**Name:** GIUFFRE, FRANK  
**Address:** 3522 RENAULT CIRCLE  
**City-St-Zip:** NORTH PORT, FL 34286 US

**Title:** MS  
**Name:** GIUFFRE, HEATHER  
**Address:** 3522 RENAULT CIRCLE  
**City-St-Zip:** NORTH PORT, FL 34291

I hereby 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 all other like empowered.

**SIGNATURE:** FRANK GIUFFRE

PVST

02/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date