## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000095526

Entity Name: F & J GOLDCOAST INC

FILED May 20, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2607 CEDAR CREST RD 2710 FLORIDA BLVD

WEST PALM BEACH, FL 33415 DELRAY BEACH, FL 33483 LIS US

**Current Mailing Address: New Mailing Address:** 

2607 CEDAR CREST RD 2710 FLORIDA BLVD

WEST PALM BEACH, FL 33415 US DELRAY BEACH, FL 33483 US

FEI Number: 27-0200676 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

GARZA, JAIME A WEXEL, FATIMA J 2607 CÉDAR CREST RD 2710 FLORIDA BLVD

WEST PALM BEACAH, FL 33415 DELRAY BEACH, FL 33483 US 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: FATIMA WEXEL 05/20/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP () Delete Title: (X) Change ( ) Addition GARZA, JAIME A ARIAS, CESAR A Name: Name: 2607 CEDAR CREST RD 7233 GOLF COLONY CT Address: Address:

City-St-Zip: WEST PALM BEACH, FL 33415 US City-St-Zip: LAKE WORTH, FL 33467 US

( ) Delete Title: DP Title: () Change () Addition Name: WEXEL, FATIMA Name:

2710 FLORIDA BLVD Address: Address: DELRAY BEACH, FL 33483 US City-St-Zip: 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: FATIMA WEXEL PD 05/20/2009