

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18496

Entity Name: COASTAL MART, INC.

FILED
Apr 19, 2005
Secretary of State

Current Principal Place of Business:

1001 LOUISIANA STREET
ATTN: STATE TAX - SUITE #E1241B
HOUSTON, TX 770025089 US

Current Mailing Address:

P.O. BOX 2511
ATTN: STATE TAX - SUITE #E1241B
HOUSTON, TX 772522511 US

New Principal Place of Business:

1001 LOUISIANA STREET
ATTN: STATE TAX - SUITE #N1827J
HOUSTON, TX 770025089 US

New Mailing Address:

P.O. BOX 2511
ATTN: STATE TAX - SUITE #N1827J
HOUSTON, TX 772522511 US

FEI Number: 76-0204155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: BAKER, ROBERT W
Address: 1001 LOUISIANA STREET
City-St-Zip: HOUSTON, TX 770025089 US

Title: PCEO () Delete
Name: FOSHEE, DOUGLAS L
Address: 1001 LOUISIANA STREET
City-St-Zip: HOUSTON, TX 770025089 US

Title: DCFO () Delete
Name: SCOTT, D. DWIGHT
Address: 1001 LOUISIANA STREET
City-St-Zip: HOUSTON, TX 770025089 US

Title: VPT () Delete
Name: HOPPER, JOHN J
Address: 1001 LOUISIANA STREET
City-St-Zip: HOUSTON, TX 770025089 US

Title: VPS () Delete
Name: SIDDALL, DAVID L
Address: 1001 LOUISIANA STREET
City-St-Zip: HOUSTON, TX 770025089 US

Title: VP () Delete
Name: GRIJALVA, NORBERT R
Address: 1001 LOUISIANA STREET
City-St-Zip: HOUSTON, TX 770025089 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: NORBERT R. GRIJALVA

VP

04/19/2005

Electronic Signature of Signing Officer or Director

_____ Date