

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40257

FILED
Mar 21, 2012
Secretary of State

Entity Name: COASTAL CAISSON CORP.

Current Principal Place of Business:

13203 BYRD LEGG DR.
ODESSA, FL 33556

New Principal Place of Business:

13203 BYRD LEGG DR.
ODESSA, FL 33556 US

Current Mailing Address:

13203 BYRD LEGG DR.
ODESSA, FL 33556

New Mailing Address:

13203 BYRD LEGG DR.
ODESSA, FL 33556 US

FEI Number: 04-3163765

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERMANA, MICHAEL A MR.
13203 BYRD LEGG DRIVE
ODESSA, FL 33556 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: D
Name: BAUER, THOMAS
Address: BAUER - STRASER 1 SCHROBENHAUSEN GE 86529
City-St-Zip: SCHROBENHAUSEN, NA DE

Title: V
Name: GILLEN, JOSEPH C P.E.
Address: 13203 BYRD LEGG DRIVE ODESSA FL 33556 GE
City-St-Zip: ODESSA, FL US

Title: D
Name: BLISS, HANS-JOACHIM
Address: BAUER - STRASER 1 GE 86529 GE
City-St-Zip: SCHROBENHAUSEN, NA DE

Title: P
Name: PUCCINI, CHARLES
Address: 13203 BYRD LEGG DR.
City-St-Zip: ODESSA, FL 33556 US

Title: S
Name: CACIO, TAMARA
Address: 13203 BYRD LEGG DR.
City-St-Zip: ODESSA, FL 33556 US

Title: T
Name: GERMANA, MICHAEL A
Address: 13203 BYRD LEGG DR.
City-St-Zip: ODESSA, FL 33556 US

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: MICHAEL A GERMANA

T

03/21/2012

Electronic Signature of Signing Officer or Director

Date