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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400034030 (4)

FIRST COAST CUSTOM, INC.

Mailing Address Principal Place of Business 6711 71ST ST N 8711 71ST ST N PINELLAS PARK FL 34885 PINELLAS PARK FL 33781-4838 3. Date incorporated or Qualified 3a. Date of Last Report New ZIP Code onl 05/02/1994 04/29/1996 28. Mailing Address 4. FEI Number Applied For 59-3241166 26 Not Applicable Suite Apt #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FRIEND, CLIFFORD T 81 Name 6711 71ST ST N 82 Street A PINELLAS PARK FL 34665 (New Zip Code only)

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signatine, typed or printed name of registered again and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12 13. DELETE 1.1 TITLE Change Addition TITLE FRIEND, CLIFFORD T NAME 1.2 NAME **6711 71ST STREET NORTH** STREET ADDRESS 1.3 STREET ADDRESS PINELLAS PARK FL 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE ___ Addition TIME 2.1 TITLE Change DRAKE, GREGORY A 2.2 NAME NAME 6711 71ST STREET NORTH 2.3 STREET ADDRESS STREET ADDRESS PINELLAS PARK FL 2. 4 City - St - ZIP City - St - ZIP Addition DELETE Change TITLE 3.1.TITLE DRAKE, CAROL A NAME 3.2 NAME 6711 71ST STREET NORTH STREET ADDRESS 3.3 STREET ADDRESS PINELLAS PARK FL C-TY-ST-ZIF 3.4 CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE Til. F NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CHTY - ST - ZIF THEF ___ DELETE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the composition or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block

CITY-SI-76

IND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/97

813-546-1469

FILED

Apr 21 1997 8:00am

Secretary of State