FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000034030 (4)

FILED Apr 29 1998 8:00am Secretary of State

FIRST COAST CUSTOM, INC. Principal Place of Business Mailing Address 6711 71ST ST NORTH 6711 71ST ST N PINELLAS PARK FL 33781 PINELLAS PARK FL 34665 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/02/1994 2a. Mailing Address 157 57, No. 2. Principal Place of Business 4. FEI Number Applied For 6820 Seminole Blud 21 59-3241166 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired UNIT 3513 Fee Required 6. Election Campaign Financing \$5.00 May Be Seminole Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible U.S.A. Personal Property Tax due June 30. ☐ Yes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name FRIEND, CLIFFORD T **6711 71ST ST NORTH** 82 Street Address (P.O. Box Number is Not Acceptable) PINELLAS PARK FL 33781 83 84 City Zip Code 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 Signature, typod or printed name of registered agent and life it applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE ☐ Addition FRIEND, CLIFFORD T NAME 1.2 NAME 6711 71ST STREET NORTH STREET ADDRESS 1.3 STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP 1.4 City - ST- ZIP DELETE Change Addition 2.1 TITLE DRAKE, GREGORY A NAME 2.2 NAME 6711 71ST STREET NORTH STREET ADDRESS 2.3 STREET ADDRESS PINELLAS PARK FL 3378/ CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME DRAKE, CAROL A 3.2 NAME 6711 71ST STREET NORTH STREET ADORESS 3.3 STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TO LE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 61 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I 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 oath; that I am an officer or director of the corporation for the receiver or truestee empowed ed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attachment with in address.

SIGNATURE:

GREGORY A. DRAKE 4/18/98

(813) 546 1469