2005 FOR PROFIT CORPORATION

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| | ANNUAL | REPORT | 1. | | | | US U8:UU |
|---|---|--|----------------------------|---|---------------------------|--|---|
| DOCUMENT # P94000036847 1. Entity Name COASTAL CHEMICALS, INC. | | | | | S | Secreta | ry of Sta |
| Principal Plac 2787 SHAMI VENICE, FL | | Mailing Address 2787 SHAMROCK DRIVE VENICE, FL 34293 | | | T (41); 414; 447; 441; 61 | :::::::::::::::::::::::::::::::::::::: | (#1 511 74) 100/1017 51/1017 |
| DO NOT WRITE IN THIS SPA | | | CE | 01072005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied Fo 65-0404878 Not Applied 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | |
| AMERMAI 1124 S. C' VENICE, F | YPRESS POINT DR. | gisterød Agent | | | NOT W | | |
| | named entity submits this statement for titions of registered agent. Signature, typed or printed name of registered agent an | | d Agent signature required | | th, in the State of Fl | orida. I am famil | ar with, and accept |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution. 10. OFFICERS AND DIRECTORS | | | neing \$5 Add | .00 May Be ed to Fees | | | |
| TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | P FLAGLER, HOWARD 2787 SHAMROCK DR VENICE, FL 34293 | HECTORS | | | Unaor 192/22/01 | 00238771 5-80013-0 |)20 150.00 |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE | FLAGLER, VICKI 2787 SHAMROCK DR VENICE, FL 34293 | | | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE | | | | | NOT W | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | IN | THIS SI | PACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ± | | | | | |
| TITLE NAME STREET ADDRESS | | | | | | | i |

12. Thereby 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X