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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000062227 (1) DOCUMENT #

COAST TO COAST DIMMING & CONTROLS INTERNATIONAL, INC.

FILED May 19 1998 8:00am Secretary of State



| Principal Place | of Business | Mailing Address | | | |
|--|--|--|--|---|---|
| 2430 ESTANCIA BOULEVARD | | 2430 ESTANCIA BOULEVARD | | | |
| SUITE 102 CLEARWATER FL -34621 3376 | | SUITE 102 CLEARWATER FL 34521 3376/ | | DO NOT WRITE IN THIS SPACE | |
| CLEARWATER | 33 161 | CLEANWRIEN FE 34021 | 0 7 | 3. Date Incorporated or Qualifie | |
| | | | | 08/18/1994 | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | 21.1 | 4 FEI Number | Applied For |
| 21 2430 | Estancia Bulevard | 26 2 430 Eslanci | a Boulevaid | 59-3297122 | Not Applicable |
| Suite, Apt | W, etc. | Suite Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 /0人 | | 27 /02 | | g. Continues of Oldios Doolings | Fee Required |
| City & State Clearwater TZ Clearwater TZ City & State | | | 5 | 6. Election Campaign Financing | |
| 23 C CC | Country | 28 Year water | Country | Trust Fund Contribution | Added to Fees |
| a 3314 | 1 h | 33761 3 | n . | This corporation owes or has Personal Property Tax due Ju | |
| 24/32 10 | 25 25 Name and Address of Current | 150 0 - 1 - 120 | <u>'1. </u> | 10. Name and Address of New | |
| MURPHY, JOSEPH E BI Name Toseph E | | | | | |
| 7 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | trest (P.O. Box Number is Not Accept | table) |
| SUITE 102 | | | 1430 | | evard |
| CLEARWATER FL 84824 3376/ | | | | w (33 | |
| | 20.461 | | 84 City~ (| 102 | 85 Zip Code , |
| | | | - $ -$ | arweter & | FL 3376/ |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered of the corporation's board of directors. Liberary accept the appointment as 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 TUBERING MUN VOSED E Mujoh Pies iden 1/25/70 | | | | | |
| 12. | Signandie, typod or pur so name of egitterhed agen OFFICERS AND | | egiste ed Agent signature request. | ADDITIONS (CHANGES TO OF | FICE S AND DIRECTORS IN 12 |
| TITLE | P | DELETE | | esident | Change Addition |
| NAME | MURPHY, JOSEPH E | | 1.2 NAME | who Flizabeth | 5 |
| STREET ADDRESS | 2430 ESTANCIA BLVD,#102 | | 1.3 STREET ADDRESS | 430 Estancia Blu | d, 17102 8 |
| CITY-ST-ZIP | CLEARWATER FL 34621 | 3316/ | 1.4 CITY - ST(ZIP) | Clearwater 12 3 | 3316/ |
| TITLE | V | ☐ DELETE | 2.1 TITLE | ice Aesiduit | Change Addition |
| NAME | Murphy, Elizabeth S | | | ruphy 61:2264h | 0, 44, 65 3 |
| STREET ADDRESS | 2430 ESTANCIA BLVD,#102 | . 1 | | al alrespocia | Bludy #1182 |
| CITY-ST-ZIP | CLEARWATER FL 34621 | 3376/ | 2. 4 CITY-ST QIP | Clearword R | 2576/ |
| TITLE | | ☐ DELETE | 3.1 TITLE | / | L Change Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | DELETE | 3.4. C(TY - ST - ZIP | | Change Addition |
| TITLE | | DELETE | 4.1 TITLE | | C. C. ISHING C. MOULTON |
| NAME CTOTES ADDRESS | | | 4, 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELETE | 4.4 CITY-ST-ZIP 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST · ZIP | | |
| TITUE | | DELETE | 6.1 TITLE | | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | 1 |
| CITY-ST-ZIP | | | 64 CITY-ST-ZIP | | |
| 14. I hereby c | ertify that the information supplied wit | h this filing does not qualify for t | he exemption stated i | n Section 119.07(3)(i), Florida Statutes | s. 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 or the receiver or trustee empowered 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 on an attachment with an address