

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 MAY 10 PM 1:48

DOCUMENT # P94000087340 (3)

1. Corporation Name

COASTLINE CANDY EXCHANGE, INC.



Principal Place of Business

2668 SW 23RD CRANBROOK DR
BOYNTON BEACH FL 33436
US

Mailing Address

2668 SW 23RD CRANBROOK DR
BOYNTON BEACH FL 33436
US

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

LAMONTAGNE, KEVIN M
640 EAST OCEAN AVENUE STE. 16
BOYNTON BEACH FL 33435

3. Date Incorporated or Qualified

12/01/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0541468

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

700001825327

83

-05/18/96--01113--010

****233.75 ****233.75

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 typed or printed name. Must be signed by the individual agent.

Signature typed or printed name. Must be signed by the individual agent.

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	NOVITA, BERNARD.	
STREET ADDRESS	2668 SW 23RD CRANBROOK DRIVE	
CITY-STATE-ZIP	BOYNTON BEACH FL	
TITLE	Boynton	☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	S/T	☐ Change ☒ Addition
2. NAME	Novita, Jack	
3. STREET ADDRESS	2668 SW 23rd Cranbrook Drive	
4. CITY-STATE-ZIP	Boynton Beach, Florida 33436	
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or the receiver or trustee or person 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Typed Name:

CR2E034 (12/95)