2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

FILED

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SECRETARY OF STATE DIVISION OF CORPORATEDUS 1. Entity Name **GULFCOAST MOLD & TOOL CORPORATION** 03 FEB 10 PM 3: 31 Principal Place of Business Mailing Address 4406 EXCHANGE AVENUE UNIT 130 4406 EXCHANGE AVENUE UNIT 130 NAPLES FL 34104 NAPLES FL 34104 LIS 2. Principal Place of Business 3. Mailing Address 4/21/02 90865 035 Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0541572 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHAW, RALPH Street Address (P.O. Box Number is Not Acceptable) 4406 EXCHANGE AVENUE UNIT 130 NAPLES FL 33942 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ AddItion SHAW, RALPH NAME NAME 3520 31ST AVE SW STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL 34117 CITY-ST-7IP STD TITLE ☐ Delete TITLE Change ☐ Addition SHAW, BONNIE NAME NAME 3520 31ST AVE SW STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL 34117 CITY-ST-ZIP TITLE . Delete TITLE Change ☐ Addition SHAW, DANIEL NAME NAME 6042 SEA GRASS LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL 34116 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ΠΠF ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- 7IP

12. 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 report or supplemental 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 10 or Block 11 if

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Attachment 55003054 P0500000418

Gulfcoast Mold & Tool Corporation

Ralph Shaw (941) 643-1017 Fax: 643-3152

4406 Exchange Ave Unit #130 Naples, Fl. 34104

January 24, 2003

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Division of Corporations **Uniform Business Report Filings** P.O. Box 1500 Tallahassee, FL 32302-1500

RE: Gulfcoast Mold & Tool Corporation

Please be advised that when last years 2002 Uniform Business Report was filed, the fee was paid twice in error. Please refer to a copy of our check #4124 dated 04/10/02 in the amount of \$300.00.

I contacted your office on January 15, 2003 and spoke with Justin who. advised me to write and request that the overpayment of \$150.00 from last year be applied to our 2003 report. Please advise me if this is not acceptable. 🕟

Enclosed is our 2003 Uniform Business Réport.

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Comptroller

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