



2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2006 8:00 am
Secretary of State

01-09-2006 90036 030 ***150.00

DOCUMENT # P95000027943 1. Entity Name SUNCOAST COMMODITIES INC.					
Principal Place of Business Mailing Address 1913 HAWAII AVE. 1985 Illinois Ave NE 1913 HAWAII AVE 1985 Illinois Ave NE SAINT PETERSBURG, FL 33703 US SAINT PETERSBURG, FL 33703 US					
2. Principal Place of Business 1985 Illinois Ave NE		3. Mailing Address 		Suite, Apt. #, etc. 	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		01042008 Chg-P CR2E034 (11/05)	
City & State ST Petersburg		City & State FL		4. FEI Number 59-3306759	
Zip 33703		Country 		Applied For Not Applicable	
Zip 33703		Country 		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HUNTER, JAMES B 1913 HAWAII AVE NE 1985 Illinois Ave NE SAINT PETERSBURG, FL 33703				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1985 Illinois Ave NE City ST Petersburg FL Zip Code 33703	
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 Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>James Hunter, Pres.</u> <u>Jan 4, 2006</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees Trust Fund Contribution.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HUNTER, JAMES B 1913 HAWAII AVE. NE SAINT PETERSBURG, FL 33703	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1985 Illinois Ave. NE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>James Hunter, Pres.</u>			<u>Jan 04, 2006</u> 727-527-1090		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		