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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000047753 (5)

COASTAL CANVAS INC.

FILED May 14 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 7848 S. US HWY 1 7848 S. US HWY 1 HYPOLUXO FL 33962 HYPOLUKO FL 33962 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/15/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 <u>65-0593719</u> Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing П Added to Fees 28 Trust Fund Contribution 23 Zip Country Zιρ Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. ☐ No 24 25 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent COOPER, JUSTIN 7848 S. US HWY 1 Street Address (P.O. Box Number is Not Acceptable) 82 HYPOLUXO FL 33962 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 Florids. 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 of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1,1 TITLE TITI F **COOPER, JUSTIN A** NAME 1.2 NAME STREET ADDRESS 3506 SE 2ND CT. 1.3 STREET ADDRESS **BOYNTON BEACH FL 33935** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE COOPER, KATHLEEN A NAME 2.2 NAME 3506 SE 2ND CT. 2.3 STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33935** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETÉ Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 1ITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE TITLE 61 THLE NAME 6.2 NAME 800002527128 -05/18/98--01053--026 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(). Profile 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 this 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.

CIONATURE TO LINE

4-27-98

561-586-2513