NOW: FILING FEE AFTER MAY 1ST IS \$55800 ORPORATION NNUAL REPORT FILED 00 SEP 12 PM 3: 27 SECRETARY OF STATE JASTAL FINANCE Tece/VE TALEAHASSEE FLORIDA Mailing Address Place of Business 5310 N.W. 33RD AVENUE N.W. 33RD AVENUE SUITE 114 114 DO NOT WRITE IN THIS SPACE FORT LAUDERDALE FL 33309 LAUDERDALE FL 33309 3. Date incorporated or Qualifed us 4. FE Number Applied For 2a. Mailing Address Place of Business Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired ---- Apt. #, etc. Fee Required 27 \$5.00 May Be 6. Election Campaign Financing City & State ™ & State Added to Fees Trust Fund Contribution 28 This corporation owes the current year Intangible Country Zip Country □No Personal Property Tax. 30 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 LIPPMAN, STEVEN N Street Address (P.O. Box Number is Not Acceptable) 1 FINANCIAL PLAZA #2308 FT. LAUDERDALE FL 33394 83 Zio Code 85 City 84 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 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or ponted name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Addition Change Change □ DELETE 1,1 TITLE Dexter W 1.2 NAME DEAN, DEXTER W 1.3 STREET ADORESS 4750 LEITNER DR T ATTEMESS 1.4 CITY-ST-ZIP **CORAL SPRINGS FL** Addition ☐ Change ST- ZIP ☐ DELETE 2.1 TITLE 2.2 NAME DEAN, JEAN 23 STREET ADDRESS 4750 LEITNER DR 12155555 2.4 CITY-ST-ZIP CORAL SPRINGS FL ☐ Addition 57 ZP DELETE 3.1 TITLE rsky, HOFSTERN, SHAPRON 3.2 NAME 21 Ct. 3.3 STREET ADDRESS 94-83 NW 42MD ST TADORESE 3.4. CITY-ST-ZIP SUNRISE FL ST 28 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS TATAL PARTY 44 CITY-ST-ZIP ☐ Change Addition ST 710 DELETE 5.1 TITLE 500003392335-5.2 NAME -09/13/00---01097--001 *****900.00 ****150.00 5.3 STREET ADDRESS TATEMES 5.4 CITY-ST-ZIP 6.1 TITLE □ DELETE 6.2 NAME 6.3 STREET ADDRESS LADORES 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 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, with all other literature. 64 CITY-ST-ZIP





• Los Angeles • New York • Miami

9/11/00

Ms. Katherine Harris Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Ms. Harris;

I just received these notices for Corporate filing Friday 9/8/00. I only received three and as you can see I have made copies of the ones that I had filed last year and updated those. I am asking that the late fee be abated and that the copies that I have sent are acceptable. If they are not please sending new Business Reports and I will fill out the new ones for Coastal Finance Corp II, III and V.

Your cooperation in this matter will be greatly appreciated. I would like to make sure that the above corporations are still on the active status role. Thanking you in advance.

Very truly yours;

Jeffrey Rosansky

Assistant Secretary/ Controller