2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000005311 1. Entity Name

FLORIDA COASTAL DEVELOPMENT CONSULTING, INC.



FILED Jan 20, 2004 08:00 AM Secretary of State

Principal Place of Business

SIGNATURE:

1449 PINE ST NICEVILLE, FL 32578

Mailing Address

1449 PINE ST NICEVILLE, FL 32578



DO	NOT	WRITE	IN	THIS	SPA	CE
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h	FEI Number	-		Applied For
	59-3358733	-		Not Applicable

5. Certificate of Status Desired

No Chg-P

01142004

\$8.75 Additional Fee Required

CR2E034 (10/03)

6. Name and Address of Current Registered Agent						
SHIN, YOUNGRAN 251 DOMINICA CR W NICEVILLE, FL 32578			DO NOT WRITE IN THIS SPACE			
	named entity submits this statement for the pions of registered agent.	urpose of changing its register	ed office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registere	d Agent signature	required when reinstating}	DATE	
	E NOW!!! FEE IS \$150,00 ay 1, 2004 Fee will be \$550,00	9. Election Campaign Finar Trust Fund Contribution.	ncing 🔲	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS	I			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST SHIN, ONG-IN 1449 PINE ST NICEVILLE, FL 32578					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000008022 01/20/04-80049-001 150.00	
title Name Street address City-St-7P				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZP						
TITLE NAME STREET ADDRESS CITY-ST-ZEP						
12. I hereby of indicated of the corrections of the	certify that the information supplied with this fit on this report or supplemental report is true a poration or the receiver or trustee empowered, or on an attachment with an address, with all	ling does not qualify for the exe and accurate and that my signa I to execute this report as requi to other like empowered.	mption state ture shall har red by Chap	d in Section 119.07(3 ve the same legal effe ter 607, Florida Statul)(i), Florida Statutes, I further certify that the Information sot as if made under oath, that I am an officer or director tes; and that my name appears in Block 10 or Block 11 if	