

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000029110 (9)
 1. Corporation Name
COACHMAN INVESTMENTS, INC.



Principal Place of Business
18835 N.W. 23RD AVENUE
MIAMI FL 33056

Mailing Address
18835 N.W. 23RD AVENUE
MIAMI FL 33056

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/27/1996

4. FEI Number
65-0668902

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business
 21 Suite, Apt. #, etc.
 22 City & State
 23 Zip Country

2a. Mailing Address
 26 Suite, Apt. #, etc.
 27 City & State
 28 Zip Country

9. Name and Address of Current Registered Agent
MURPHY, BETTY
18835 N.W. 23RD AVENUE
MIAMI FL 33056

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 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 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.

SIGNATURE _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE	D COACHMAN, MICHELLE 18835 N.W. 23RD AVENUE MIAMI FL 33056	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<i>Secretary / Treasurer</i>
<input checked="" type="checkbox"/> DELETE	D BANKS, EARNESTINE 4420 N.W. 173RD DRIVE MIAMI FL 33055	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<i>Betty Murphy</i>
<input type="checkbox"/> DELETE	D MURPHY, BETTY 18835 N.W. 23RD AVENUE MIAMI FL 33056	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<i>18835 N.W. 23rd Ave</i>
<input checked="" type="checkbox"/> DELETE	D GARFIELD, LINDA 12950 W GOLF DRIVE MIAMI FL 33167	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<i>Miami FL 33056</i>
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. 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.

SIGNATURE: *Betty C. Murphy* **2/4/98** **305 6248312**

CR2E034 (10/97)