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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000052861 (7)

COASTAL MAUSOLEUM CONSTRUCTORS, INC.

FILED Mar 03 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address						T I ERRICORI EIN INIUR DIEIT NOITT GREET RAIT	is Maidi Silil		A BALBA HABA ING	II .
5505 NW 48 I		5505 NW 48 PLACE								
GAINESVILLE FL 32606		GAINESVILLE FL 32606				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified				
						06/19/1996				
_	ace of Business	2a. Mailing Address				4. FEI Number			Applied Fo)r
21	H	26	*			59-3388818		Not Applicable		
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.	h=-1			5. Certificate of Status Desired	X		5 Additions	al
Çity & State	}	City & State	City & State						Required	
23		1 1 1	28			Election Campaign Financing Trust Fund Contribution Added to Fees				' [
Zip	Country	Zip	'ip Coui			8. This corporation owes or has paid the current year Intangible				
24	25	29	30			Personal Property Tax due June 30. X Yes No				1
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Reg		gent		
	Tenberg, Barry B			81	Name		·			
	5 NW 48 PLACE			82	Street Add	dress (P.O. Box Number is Not Acceptable	e)	••••		\dashv
GAI	NESVILLE FL 32606			_						
				83]
				84	City		1-1	85 Z	ip Code	$\neg \neg$
11. Pursuant t	o the provisions of Sections 607 056	02 and 607 1508 Florida Statut	les the al	hove	-named cor	poration submits this statement for the pu	FL upose of	hangin	a ite regiete	200
Office of re	egistored agent, or both, in the State in familiar with, and accept the oblig	e of Florida. Such change was :	authorize	d hv	the cornors	ation's board of directors. I hereby accept	the appo	intment	as registere	ed
SIGNATURE .										
	Signature typed or printed name of registered ag			d Ager	nt signature requ	pired when reinstating)	DATE			I
TITLE	PD	ID DIRECTORS DELETE	13.	Té E	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICE		Chang		
NAME	RUTENBERG, BARRY B	Carlo Decere	1.2 N/					—) Almid	1e 11 van	THE STATE OF
STREET ADDRESS	5505 NW 48 PLACE				ADDRESS					18
CITY-ST-ZIP	GAINESVILLE FL 32606		1.4 CITY-		1					
TITLE	· v	DELFTE	2.1 Til					Chang	e 🔲 Adid	dition
NAME	PAYNE, R. DONALD		2.2 NA	ME						
STREET ADDRESS	5505 NW 48 PLACE		2.3 \$1	REET	ADDRESS					- 1
CATY-ST-ZIP	GAINESVILLE FL 32606		2.4 C	(TY-\$	T - ZIP					
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NAME	RUTENBERG, KIRSTEN		3.2 NA							İ
STREET ADDRESS	5505 NW 48 PLACE GAINESVILLE FL 32606	ECM LE EL GOODE			ADDRESS					
CITY-ST-ZIP TITLE	OWNED LITTE LE 25000	DELETE	3.4. CI		T-21P			Chang	, [Tai	tition
NAME			4.2 N						je 🛄 Add	JACON /
STREET ADDRESS					ADDRESS					
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NAME			52 NA				•			
STREET ADDRESS					ADDRESS					
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NAME			6.2 NA	ME						
STREET ADDRESS			6.3 ST	REET #	ADDRESS					- }
CITY-ST-ZIP		111 111 VELTO BEAUTING AND ADMINISTRA	6.4 CH	IY-ST	-ZIP					

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cycliged, or on an attention address.