

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000081962

1. Entity Name

COASTAL LATHING, INC.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
PARK ST HOLLYWOOD FL 33024	C/O MITCHELL A. SILVER P.O. BOX 22-3592 HOLLYWOOD FL 33022-3592



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	65-0702350	Applied For
		Not Applicable

5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
TOMLINSON, RICK 6771 PARK ST HOLLYWOOD FL 33024	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	Signature typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when resigning)	DATE
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9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PTD	TITLE	
NAME	TOMLINSON, RICK	NAME	
STREET ADDRESS	6771 PARK ST	STREET ADDRESS	
CITY-STATE-ZIP	HOLLYWOOD FL 33024	CITY-STATE-ZIP	
☐ Delete		☐ Change ☒ Addition	
TITLE		TITLE	VP
NAME		NAME	ANDREW BODNAR
STREET ADDRESS		STREET ADDRESS	704 NE 7 ST
CITY-STATE-ZIP		CITY-STATE-ZIP	HALLANDALE, FL 33009
☐ Delete		☐ Change ☒ Addition	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
☐ Delete		☐ Change ☐ Addition	
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☐ Delete		☐ Change ☐ Addition	
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CITY-STATE-ZIP		CITY-STATE-ZIP	
☐ Delete		☐ Change ☐ Addition	

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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE	<i>Ricky Tomlinson</i>	3/16/2000	(954)922-0886
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