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

Mailing Address

DESTIN FL 32541

75-C POMPANO STREET

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000084891

Principal Place of Business

75C POMPANO STREET DESTIN FL 32541

COASTAL ELECTRIC SERVICES & CONTRACTING, INC.

							Date Incorporated or Qualifed 10/14/1996		
2 Principal Pl	ace of Business	2a.	Mailing Address				4. FEI Number	Ar	plied For
Z. Principal Pi	ace of Busiliess	\vdash	Mailing Address				59-3403809		ot Applicable
Suite, Apt. :	# etc	26	Suite, Apt. #, etc.	`			9		Additional
22		27				 	5. Certificate of Status Desired	Fee Re	equired
City & State	8		City & State	÷-	••		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be
23 [Country	28	Zip	Coun	ntrv		· · · · · · · · · · · · · · · · · · ·		.01000
Zip	25		·	30	iu y		8. This corporation owes the current year Intangi Personal Property Tax.	Yes	X _{No}
					10. Name and Address of New Registered Age				
	3. Name and Address of Current	Kegisi	erea Agent		81	Name			
HROMADKA, LINDA									
75-C POMPANO STREET					82	Street Addres	ss (P.O. Box Number is Not Acceptable)		
DESTIN FL 32541					83				
525.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ľ	03				
				ļ	84	City	FL	5 Zip	Code
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida	a. Such change was at	ithorized	by tr	named corpo he corporation	ration submits this statement for the purpose of chan's board of directors. I hereby accept the appointment	nging its ent as re	registered egistered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if a	applicable. (NOTE:	Registered A	Agent s	signature required v			
12.	OFFICERS AND	DIREC	TORS	13.	_		ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE	Р		☐ DELETE	1.1 TM	LE] Change	Addition
NAME	HROMADKA, WILLIAM L.			1.2 NAM	ME				
STREET ADDRESS	75 C. POMPANO ST			1.3 STF	REET A	ADDRESS			
CITY-ST-ZIP	DESTIN FL			1.4 CIT	Y-ST-	.ZIP			
TITLE	VP		☐ DELETE	2.1 7171				Change	Addition
NAME	HROMADKA, LINDA R.			2.2 NAJ	ME				
STREET ADDRESS	75 C. POMPANO ST					ADDRESS			
1	DESTIN FL			2. 4 CIT					
CITY-ST-ZIP	DEGINTE		☐ DELETE	3.1 TITI		-235		Change	Addition
TITLE			- Arreir	3.2 NA			_	_	-
NAME									
STREET ADDRESS				1		ADDRESS			
CITY+ST-ZIP			☐ DELETE	3.4. CIT		-ZIP		Change	, Addition
TITLE				4.1 TITI		.	L.	, 51101195	, Liveringin
NAME				4. 2 NA		ļ			
STREET ADDRESS				4.3 STF	REET /	ADDRESS			
CITY-ST-ZIP				4.4 CIT		-ZIP		106	
TITLE			□ DELETE	5.1 TIT			L] Change	☐ Addition
NAME				5.2 NA					
STREET ADDRESS				5.3 STF	REET /	ADDRESS			
CITY-ST-ZIP				5.4 CIT	. •	-ZIP			
TILE			☐ DELETE	6.1 TITI	LE] Change	☐ Addition
NAME				6.2 NA	ME				
STREET ADDRESS				6.3 STF	REET A	ADDRESS			
CITY-ST-7IP	r			6.4 CIT					
14 I horoby	certify that the information supplied with	this fili	ing does not qualify for	the exen	nptio	n stated in Se	ection 119.07(3)(i), Florida Statutes. I further certify	that the	information
indicated officer or	on this applied report or supplemental s	er or tr	report is true and accui ustee empowered to ex	rate and t xecute th	that is re	my signature port as require	shall have the same legal effect as if made under o ed by Chapter 607, Florida Statutes; and that my na	aın: ınaı	i am an

850)654-3975

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90032 050 ***150.00

DO NOT WRITE IN THIS SPACE