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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P9700025973 (3)

COFFIN ENTERPRISES, INC.

## FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2878 S.W. 13TH COURT 2878 S.W. 13TH COURT FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/24/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0744897 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 26 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. L Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name COFFIN, DONALD D 2878 S.W. 13TH COURT Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33312 **B3** 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 D DELETE TITLE 11 TITLE ☐ Change ☐ Addition COFFIN, DONALD D NAME 1.2 NAME 2878 S.W. 13TH COURT STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33312 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - \$1 - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-S1-ZIP 5.4 CITY-ST-ZIP TITLE □ DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

14. Thereby 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 person of supplemental annual person is true and accorded 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 design empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with)an address.

CICNIATURE.

CR2E034 (10/97)