## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 24, 2005 08:00 AM Secretary of State

1. Entity Name COASTLINE STUDIOS INC.						
322 EAST PI	INE STREET _	Mailing Address 322 EAST PINE STREET ORLANDO, FL 32801				8177 1111/ 1174/ 1184/ 884/ 1184/ 1184/ 1184/
DO NOT WRITE IN THIS SPA			CE	01202005 4. FEI Number 59-3444	No Chg-P	CR2E034 (10/03)  Applied For Not Applicable  \$8.75 Additional Fee Required
Name and Address of Current Registered Agent  MORGAN, RICHARD J     322 EAST PINE STREET     ORLANDO, FL 32801  8. The above named entity submits this statement for the purpose of changing its registered.			DO NOT WRITE IN THIS SPACE red office or registered agent, or both, in the State of Florida. I am familiar with, and accept			
SIGNATURE_	Signature, typed or printed name of registered agent and filk	s if applicable. (NOTE Registers  9. Election Campaign Finar	d Agent signature required			DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  10. OFFICERS AND DIRECTO		Trust Fund Contribution.		.00 May Be led to Fees	· · · · · · · · · · · · · · · · · ·	Service and a second of the second of the second of
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORGAN, RICHARD J 322 EAST PINE STREET ORLANDO, FL 32801				U000001 01/24/05-8	91771 10186-025 150.00
TITLE NAME STREET ADDRESS GITY-SY-ZIP				DO	NOT WF	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		IN T	HIS SPA	ACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

ORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR