2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000040354

1. Entity Name
GULF COAST PROFESSIONAL TATTOO, INC.

Principal Place of Business
10442 FRONT BEACH RD
PANAMA CITY BEACH, FL 32407

Mailing Address
10442 FRONT BEACH RD
PANAMA CITY BEACH, FL 32407

08242004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0819452

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JAMES, CAROL A
102 GREENWOOD DRIVE
PANAMA CITY BEACH, FL

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PVST
NAME	JAMES, CAROL A
STREET ADDRESS	102 GREENWOOD DR
CITY ST ZIP	PANAMA CITY BEACH, FL 32407
TITLE	D
NAME	SPINDLER, JOEY
STREET ADDRESS	1605 DEWITT ST
CITY ST ZIP	PANAMA CITY, FL 32401
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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08/25/04-80002-006 550.00

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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.

SIGNATURE: Joey Spindler 8/20/04 (850)233-1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #