2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 30, 2001 8:00 am Secretary of State DOCUMENT # P98000041813 CORAL COAST DEVELOPMENT, INC. 94-30-2001 90119 008 ***150.00 Principal Place of Business Mailing Address 2855 S. CONGRESS AVE. 2855 S. CONGRESS AVE. DELRAY BEACH FL 33445 CENTERRA DELRAY BEACH FL 33445 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0850854 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RANDAZZO, JEFFREY A 4760 N.W. 106TH AVE. **DELRAY BEACH FL 33076** 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, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE ☐ Delete TITLE Change RANDAZZO, JEFFREY A NAME STREET ADDRESS STREET ADDRESS 4760 N.W. 106TH AVE. CITY-ST-ZIP CITY-ST-ZIP **CORAL SPRINGS FL 33076** TITLE TITLE ☐ Delete Addition NAME RANDAZZO, LEILA B NAME STREET ADDRESS STREET ADDRESS 4760 N.W. 106TH AVE. CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33076 Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 the 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 rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12. changed, or on an attachment with an address, with all other like empowered.