2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 28, 2006
Secretary of State

DOCUMENT# P98000104376

Entity Name: COASTAL BLINDS, INC.

Current Principal Place of Business:

3949 EVANS AVE,
#205
FORT MYERS, FL 33901 US

New Principal Place of Business:

7091 PINNACLE DR.
UNIT E
FORT MYERS, FL 33907 US

Current Mailing Address:

3949 EVANS AVE,
#205
FORT MYERS, FL 33901 US

New Mailing Address:

7091 PINNACLE DR.
UNIT E
FORT MYERS, FL 33907 US

FEI Number: 65-0892475 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CULLEN, TERESA
3949 EVANS AVE.
#205
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

CULLEN, TERESA
7091 PINNACLE DR.
UNIT E
FORT MYERS, FL 33907 US

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: TERESA CULLEN 09/28/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CULLEN, TERESA
Address: 3949 EVANS AVE, # 403
City-St-Zip: FORT MYERS, FL 33901

Title: DST ( ) Delete
Name: BURTOFT, ERIC
Address: 3949 EVANS AVE, # 403
City-St-Zip: FORT MYERS, FL 33901

Title: DVP ( ) Delete
Name: CULLEN, JR, JAMES P
Address: 3949 EVANS AVE, 403
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: CULLEN, TERESA
Address: 7091 PINNACLE DR. UNIT E
City-St-Zip: FORT MYERS, FL 33907

Title: DST (X) Change ( ) Addition
Name: BURTOFT, ERIC
Address: 7091 PINNACLE DR. UNIT E
City-St-Zip: FORT MYERS, FL 33907

Title: DVP (X) Change ( ) Addition
Name: CULLEN, JR, JAMES P
Address: 7091 PINNACLE DR. UNIT E
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERESA CULLEN DP 09/28/2006
Electronic Signature of Signing Officer or Director Date