

# 2000 UNIFORM BUSINESS REPORT (UBR)

5/4/2000 09:16:03 030 \*\*\*158.75

DOCUMENT # P99000022751

1. Entity Name

GOLD COAST DISTRIBUTION INC.

**FILED**  
**May 26, 2000 8:00 am**  
**Secretary of State**

05-04-2000 90168 030 \*\*\*158.75

Principal Place of Business

Mailing Address

2126 COOLIDGE ST  
HOLLYWOOD FL 33020

PO BOX 223788  
HOLLYWOOD FL 33022-3788

2. Principal Place of Business

2126 Coolidge St  
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 223788  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Hollywood Fl.

City & State

Hollywood Fl.

4. FEI Number

65-0913234

Applied For

Not Applicable

Zip

Country

33020 USA

Zip

Country

33022 Broward

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WISTHOFF, BRIAN  
2126 COOLIDGE ST  
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition  
President  
Ginger McDonald  
2126 Coolidge St  
Hollywood FL 33020

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition  
VICE President  
Brian Wisthoff  
2126 Coolidge St  
Hollywood FL 33020

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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

SIGNATURE:

*MANAGEMENT REQUIRED*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/00 954-920-9207  
Date Daytime Phone #

CR2E034 (9/99)