

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P99000022751**

1. Entity Name

**GOLD COAST DISTRIBUTION INC.****FILED**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA****01 SEP -4 PM 4:12**

DO NOT WRITE IN THIS SPACE

Principal Place of Business 2126 COOLIDGE ST HOLLYWOOD FL 33020		Mailing Address PO BOX 223788 HOLLYWOOD FL 33022	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>65-0913234</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
WISTHOFF, BRIAN 2126 COOLIDGE ST HOLLYWOOD FL 33020		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so? <input checked="" type="checkbox"/> (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCDONALD, GINGER 2126 COOLIDGE ST HOLLYWOOD FL 33020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300004583429-9 -03/11/01--01080--003 ****150.00 ****150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WISTHOFF, BRIAN 2126 COOLIDGE ST HOLLYWOOD FL 33020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Ginger McDonald  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/8/01

Date

954-920-9207

Daytime Phone #

0489990

CR2E034 (10/00)

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8/08/01

Fl. Division of Corporations

As per my conversation with  
scott an agent at the Fl. Division of  
Corporations. I have enclosed the  
filing fee of \$150<sup>00</sup>.

Due to circumstances beyond  
my control, flooding of my principal  
place of business, and inability to  
contact my previous accountant, I  
was unable to send out my report  
in a timely manner.

Sincerely

Ginger McDonald  
Gold Coast Dist Inc

Doc # P99000022751

P.O. Box 223788

Hollywood Fl 33020

954.920.9207 ph

954.929.4771 fax