

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000026027

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: COASTAL HEALTH SERVICES, INC.

## Current Principal Place of Business:

6320 ST AUGUSTINE RD  
JACKSONVILLE, FL 32217

## New Principal Place of Business:

## Current Mailing Address:

1031 N. MIAMI BEACH BLVD  
N MIAMI BEACH, FL 33162

## New Mailing Address:

FEI Number: 59-3562745

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAIMOWITZ, HAROLD B  
4700 BOCA RATON BLVD  
SUITE B201  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Change (X) Addition  
Name: BAKER, MICHELLE  
Address: 2275 S. FEDERAL HIGHWAY #310  
City-St-Zip: DELRAY BEACH, FL 33483

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHELLE BAKER

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date