2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 19, 2002 8:00 am
Secretary of State
08-19-2002 90137 004 ***150.00

DOCUMENT # S55335

1. Entity Name
COASTAL PRESSURE SERVICES, INC. ✓

Principal Place of Business	Mailing Address
2556 DUDLEY DRIVE EAST SUITE F WEST PALM BEACH FL 33415	2556 DUDLEY DRIVE EAST SUITE F WEST PALM BEACH FL 33415

DO NOT WRITE IN THIS SPACE

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 65-0263384 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARTIN, ALBERT 2556 DUDLEY DRIVE EAST SUITE F WEST PALM BEACH FL 33415	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. I am familiar with, and accept the obligations of registered agent.

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 $550.00
After September 13, 2002 Fee will be $750.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PST MARTIN, ALBERT 2556 DUDLEY DR EAST #F WEST PALM BCH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTIN, ALBERT 2556 DUDLEY DR EAST #F WEST PALM BCH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (4/02)

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: ✓ Albert Martin ✓ 8/14/02 ✓ 561 439-3253

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

L. A. WOODLEY, PA Attachment 975344

Certified Public Accountant & Consultant

Member of
American Institute of
Certified Public Accountants
Florida Institute of
Certified Public Accountants

July 30, 2002

J55335

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Coastal Pressure Services, Inc.
FEI# 65-0263384

To Whom It May Concern:

Please find attached the 2002 Uniform Business Report with a check for $150. Please know that the shareholder/manager does not recall receiving the original report and would of mailed the report timely if he had received it.

During the last year the shareholder/manager has been extremely ill and has been unable to attend to the business affairs of the business in the normal manner. If this had not been the case, he would have remembered that he had not received the form and contacted the State.

Please consider these circumstances and abate the penalty that has been assessed. We truly appreciate your time and consideration in this matter.

Respectfully,

Lori A. Woodley, CPA

301 Clematis Street, Suite 3000, West Palm Beach, Florida, 33401
Telephone (561) 586-6432 Facsimile (561) 586-4238