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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

904-488-4000

Jan...

DOCUMENT # S61922

1. Corporation Name

BI-COASTAL INDUSTRIES, INC.

(8)

904-487-6059

Sharon Tomin

6979

2/2-24-97



Principal Place of Business

4301 32ND STREET WEST
SUITE C-11
BRADENTON FL 34205
US

Mailing Address

4301 32ND STREET WEST
SUITE C-11
BRADENTON FL 34205-2700
US

3. Date Incorporated or Qualified 06/25/1991
3a. Date of Last Reg 01/24/1996

4. FEI Number 54-1590377
App Not

5. Certificate of Status Desired ☐ \$8.75 Ar
Fee Req

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00
Added to

8. This corporation has liability for intangible tax under s
Florida Statutes ☐ Yes ☐ No

2. Principal Places of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

CUTRIGHT, STEPHEN D.
3211 WYOMING COURT
TALLAHASSEE FL 32312

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip

11. Pursuant to the provisions of Sections 607.01(2) and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its
address to the principal place of business in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as
secretary of the corporation and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(If the corporation is a foreign corporation, the signature of the authorized officer must be accompanied by a certified translation of the signature into English.)

(If the corporation is a foreign corporation, the signature of the authorized officer must be accompanied by a certified translation of the signature into English.)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE P ☐ DELETE

1.2 NAME NORRIS, DEWAINE T.

1.3 STREET ADDRESS 6404 29TH AVE W

1.4 CITY, ST, ZIP BRADENTON FL

2.1 TITLE ☐ DELETE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE ☐ DELETE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE ☐ DELETE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE ☐ DELETE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE ☐ DELETE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR

1.1 TITLE ☒ Change

1.2 NAME

1.3 STREET ADDRESS 12000 4TH ST N, APT 138

1.4 CITY, ST, ZIP ST PETERSBURG, FL 33716 ☐ Change

2.1 TITLE ☐ Change

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change

3.2 NAME

3.3 STREET ADDRESS 200002110172--8

3.4 CITY, ST, ZIP -03/11/97--01109--001

4.1 TITLE ***165.00 ***165.00 ☐ Change

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made by 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 it appears in Block 12 or Block 13 if it is changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-31-96

Date

941-756-7005

Daytime Phone