## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S61922

(8)

BI-COASTAL INDUSTRIES, INC.

| FILED              |  |
|--------------------|--|
| Feb 06 1998 8:00an |  |
| Secretary of State |  |

| Principal Place  | e of Business                                      | Mailing Address  |                     |                |                  |   |
|--|--|--|---------------------|----------------|------------------|---|
| 4301 32ND STREET WEST<br>SUITE C-11<br>BRADENTON FL 34206  |  | 4301 32ND STREET WEST<br>SUITE C-11<br>BRADENTON FL 34205      |                     |                |                  | DO NOT WRITE IN THIS SPACE  |
| US   |  | US   |                     |                |                  | 3. Date Incorporated or Qualified 06/25/1991  |
| 2. Principal Pi  | ace of Business                                    | 2a, Mailing Address  | <del></del>         |                | -                | 4. FEI Number Applied For   |
| 21 Suite 31  | 2  | 26 Suite 312   |                     |                |                  | <b>54-1590377</b> Not Applicable  |
| 7901 Fourth Street North   |  | - 7901 Fourth Street North                                     |                     |                |                  | 5. Certificate of Status Desired Security \$8.75 Additional   |
| St. Peter  | sburg FL 33702 USA                                 | 27 St. Petersburg FL 33702 USA                                 |                     |                |                  | Fee Required  |
| 23   |  | 28   |                     |                |                  | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  |
| Zip  | Country  | Zip  | Cour                |                |                  | 8. This corporation owes or has paid the current year Intangible  |
| 24   | 25 YIN ELLMS                                       | 29   | 30 %                | ~              | ELLHI            | Personal Property Tax due June 30. Yes No   |
| 01.5   | 9. Name and Address of Curren                      | t Hegistereo Agent   |                     | <b>B1</b>      | Name             | 10. Name and Address of New Registered Agent  |
|  | tright, stephen D.<br>1 wyoming court              |  |                     |                |                  |   |
|  | LAHASSEE FL 32312                                  |  | }                   | 82             | Street Ad        | address (P.O. Box Number is Not Acceptable)   |
| 1110   | DANOOFF IF OF OR                                   |  | ľ                   | 83             |                  | , , , , , , , , , , , , , , , , , , ,   |
|  |  |  | -                   | 84             | City             | 85 Zip Code   |
|  |  |  |                     |                | ·                | <u> </u>  |
| office or re   | egistered agent, or both, in the State             | of Florida, Such change was                                    | s authorized        | l hv           | the corpor       | corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered |
| agent. I ar  | m familiar with, and accept the obliga             | ations of, Section 607.0505, F                                 | Florida Statu       | utes           |                  | , , , ,   |
| SIGNATURE .  | Signature, typed or printed name of registered age | rul and tale if applicable (NC                                 | (21) Hegislarea     | Agg            | of singature ted | Equired when reinstating) DATE  |
| 12.  | OFFICERS AND                                       |  | 13.                 |                |                  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   |
| TITLE  | P  | DELETE   | 1.1 7(1)            | i <del>E</del> |                  | ☐ Change ☐ Addition   |
| NAME   | NORRIS, DEWAINE T                                  |  | 1.2 NA              | ME             |                  |   |
| STREET ADDRESS   | 12000 4TH ST. N., APT 138                          |  |                     |                | ADDRESS          |   |
| CITY-ST-ZIP<br>TITLE   | ST. PETERSBURG FL 33716                            | DELETE   | 2 1 THT             |                | T-ZIP            | Change Addition   |
| NAME   |  | F1 5011.5  | 2.2 NA/             |                | 1                | Silango (Line Common )  |
| STREET ADDRESS   |  |  |                     |                | ADDRESS          |   |
| CITY-ST-ZIP  |  |  | 2. 4 CIT            | TY-\$          | 1-2IP            |   |
| TITLE  |  | ☐ DELETE   | 3.1 1170            | ιĘ             |                  | ☐ Change ☐ Addition   |
| NAME   |  |  | 3.2 NAM             |                |                  |   |
| STREET ADDRESS   |  |  |                     |                | address          |   |
| CITY-ST-ZIP<br>TITLE   |  | □ DELETE   | 3.4. CII<br>4.1 DIL |                | 1-2(P            | Change Addition   |
| NAME   |  | L bearing  | 4. 2 NA             |                |                  | C Ottango C Machine   |
| STREET ADDRESS   |  |  |                     |                | ADORESS          |   |
| CITY-ST-ZIP  |  |  | 4.4 CITY            |                |                  |   |
| TITLE  |  | DELETE   | 51101               |                |                  | ☐ Change ☐ Addition   |
| NAME   |  |  | 5.2 NAM             | ME             | İ                |   |
| STREET ADDRESS   |  |  | 5.3 S1R             | REEL           | ADDRESS          |   |
| DITY-ST-ZIP  |  | T brieve   | 5.4 CIT             |                | r- 7(P           |   |
| TITLE  |  | ☐ DEFELE   | 6.1 TITE            |                |                  | L Change Addition   |
| NAME   |  |  | 6.2 NAN             |                | 1000000          |   |
| STREET ADDRESS   |  |  | 6.3 STR             |                | ADDRESS          |   |
| 14. I hereby co  | ertify that the information supplied wi            | th this filing does not qualify                                | for the exer        | mpt            | ion stated in    | in Section 119.07(3)(i), Florida Statutes. I further certify that the information   |
| indicated of officer or of the control of the contr | on this annual report or supplementa               | Lannual report is true and ac<br>eiver or trustee empowered to | ccurate and         | tha            | it my signat     | ature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statules; and that my name appears in         |