


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2004 08:00 AM
Secretary of State

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|---|---|
| DOCUMENT # V48169 1. Entity Name COCONUT CREEK MOBIL, INC. |  |
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| Principal Place of Business COCONUT CREEK MOBILE INC. 3900 COCONUT CREEK PKWY. COCONUT CREEK, FL 33066 US | Mailing Address 3345 CLELAND ST. HOLLYWOOD, FL 33021 US |
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DO NOT WRITE IN THIS SPACE



03162004 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0342364 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent MAKHANLALL, BHAGVATEE 3345 CLEVELAND ST. HOLLYWOOD, FL 33021 |
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IN THIS SPACE**

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.

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| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and one if applicable. (NOTE: Registered Agent signature required when reissuing)</small> | DATE _____ |
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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees | 04/21/04-80032-007 150.00 |
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| 10. OFFICERS AND DIRECTORS | |
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| NAME D MAKHANLALL, ROY STREET ADDRESS 3345 CLEVELAND ST. CITY-ST-ZIP HOLLYWOOD, FL | |
| NAME D MAKHANLALL, BHAGVATEE STREET ADDRESS 3345 CLEVELAND ST. CITY-ST-ZIP HOLLYWOOD, FL | |
| NAME STREET ADDRESS CITY-ST-ZIP | |
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| NAME STREET ADDRESS CITY-ST-ZIP | |

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empower.

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| SIGNATURE: <u>Roy Mahhanall</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | 3-25-04 <small>Date</small> | 954-987-0519 <small>Daytime Phone #</small> |
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