

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 14, 2003 8:00 am
Secretary of State

01-14-2003 90087 001 ***158.75

DOCUMENT # F00000001887

1. Entity Name

GULFSTREAM GROUP, INC. of DELAWARE



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business PO BOX 751
950 SULLIVAN AVE #19

3. Mailing Address
3109 GRAND AVE, #204

Suite, Apt. #, etc.
SOUTH WINDSOR, CT

Suite, Apt. #, etc.
MIAMI

City & State
CONNECTICUT

City & State
FLORIDA

ZIP
06074

COUNTRY
USA

ZIP
33133

COUNTRY
USA

4. FEI Number
06-1226031

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
MARK F. BUTLER

Street Address (P.O. Box Number is Not Acceptable)
3109 GRAND AVE # 204

City
MIAMI

FL 33133

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MARK F. BUTLER 46 SUNSET TERRACE SOUTH WINDSOR, CT. 06074
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ARTHUR L. CLOUGH - SEC 8A RIVERVIEW DR. EAST WINDSOR, CT. 06088
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IN THIS SPACE**

CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mark F. Butler MARK F. BUTLER, PRES.

01/09/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #