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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90209 013 ***150.00

DOCUMENT # **P96000037755**

1. Corpora ion Name

GFC COMMUNICATIONS CORP.

Principal Place	e of Business	Mailing Address						••••				
250 S. AUSTRALIAN AVE.		250 S. AUSTRALIAN AVE.										
STE 1503 WEST PALM BEACH FL 33401		STE 1503 WEST PALM BEACH FL 33401				DO NOT WRITE IN THIS SPACE						
WEST PALM DE	EACH FL 33401	WEST FALM BEACH PE 33401				ŀ	3. Date ir corporated or Qualifed					
								/1996				
2 Principa Pl	lace of Business	2a. Mailing Address					4. FEI Nu			Ap	plied For	1
21		26					31-14	49597		No	t Applicable	1
Suite, Apt.	#, etc.	Suite, Apt. #, etc.								\$8.75 A	alditional	1
22		27				5. Certiic	ate of Status Desired		Fee Re	cuired]	
City & S:ate	e	City & State					6. Electio	1 Campaign Financing	, _	\$5.00	May Be	
23		28				Trust`F	und Contribution		Added to	Fees	-	
Zip	Country	Zip	Country					rporation owes the cu	rrent year in			
24	25	29	30					al Property Tax.	D		[]No	┨
	9. Name and Address of Current	Registered Agent		81	Nama		10. Name	and Address of New	Registered	1 Agent		1
SWA	AM, DENELLE			°'	Name]
	S. AUSTRALIAN AVE		82 Street Acdre			c dres	s (P.O. Box	Number is Not Accep	table)			}
	1503		83									4
	T PALM BEACH FL 33401											
	THE DESCRIPTION OF			84	City		· · · ·			85 Zip C	ode	1
	to the provisions of Sections 607.0502						ation output	a this statement for th	- FL	of changing its	ragistered	-
office or re	egistered agent, or bo h, in the State c	f Florida. Such change was a	suthorized	by ti	he corpoi	ration'	s board of	lirectors. I hereby acc	ept the apro	ointment as rec	stered	
agent. a	m familiar with, and accept the obligati	ons of, Section 607.0505, Fi	orida Statu	tes.								
SIGNATURE	Signature, typed or printed na ne of registered agent	and title of applicable (A)OT	Resetered	Agent	cianatura ca	a irad w	then rejectations		DATE			١,
12.	OFFICERS ANE				qi iibo w		INS/CHANGES TO C		ND DIRECTO	F:S IN 12	1 8	
TITLE	P	☐ DELETE		1.1 TITLE 1)			7			Change	Addition	1;
NAME	PLANK, GEOFFREY C		1.2 NA	ME	1	1/	1 D	ممثره بالمحمد	@A	/ `		
STREET ADDRESS	ASSAS OVEODO DE LIMIT A	1.3		1.3 STREET ADDRESS \\		106	10 to 1	condiquorie	nu	,		غ ا
CITY-ST-ZIP	BOCA RATON FL 33433		14 CIT	Y-ST-	- ZIP	ME	3+Pn	andywine Im Beach	れき	34.09		1 8
TITLE	S	DELETE	2.1 TIT				-, ,	<u></u>	,	Change	Addition	1 5
NAME	SWAIM, DENELLE		2.2 NA	ME						, -		-
STREET ADDRESS	4200 COMMUNITY DR #416		2.3 S TI	REET	ADDRESS	356	B Cherry Rd.					
CITY-ST-ZIP	WEST PALM BEACH FL 33409			2 4 CITY-ST-ZIP			J ()	ð				-
TITLE	T	DELETE	3.1 TIT	_						☐ Change	☐ Addition]
NAME	PLANK, GEOFFREY C		3.2 NA	ME								
STREET ADDRESS	22910 OXFORD PL UNIT A		3.3 STREE		ADORESS							
CITY-ST-ZIP	BOCA RATON FL 33433		3.4. Ci	TY-ST	ZIP]
TITLE		☐ DELETE	4.1 TIT	LΕ						Change	Addition	
NAME			4. 2 NA	ME								
STREET ADDRESS			4.3 STI	REET	ADDRESS							
CITY-ST-ZIP			4.4 CIT	Y-ST-	- ZIP	<u></u> _						
TITLE		☐ DELETE	5.1 TIT	LE	-					☐ Change	Addition	
NAME			5.2 NA	ME								
STREET ADDRESS			5.3 STI	REET	ADDRESS							
CITY-ST-ZIP			5.4 CIT	Y-ST-	- ZIP						<u>-</u>	
TITLE		☐ DELETE	6.1 TIT	LE						Change	Addition	
NAME			6.2 NAME									
STREET ADDRESS			6.3 STI	REET	ADDRESS							

14. I hereby certify that the informa ion 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 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 12 or Block 13 if changed, or on an attact ment with an address, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP