

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

95 APR 25 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V05089** (0)
1. Corporation Name
GSBR, INC.

Principal Place of Business Mailing Address
**2100 GULF DR.
BRADENTON BEACH FL 34217
US** **POST OFFICE BOX 22095
ST. PETERSBURG FL 33742
US**

3. Date Incorporated or Qualified **01/09/1992** 3a. Date of Last Report **03/10/1994**
4. FEI Number **59-3099446** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
24 Zip 25 Country 28 Zip 30 Country

9. Name and Address of Current Registered Agent
**MASCARA, ERNEST L
877 EXECUTIVE CENTER DRIVE WEST
GLADES BUILDING, SUITE 303
ST PETERSBURG FL 33702**

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 Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **April 20, 1995**
Signature: Type the printed name of registered agent and title, applicable (NOTE: Registered Agent signature required when restoring) DATE

12. OFFICERS AND DIRECTORS

TITLE	DSTP
NAME	SALLY, ROBERT J
STREET ADDRESS	13 STAPLEDON CRESCENT
CITY - ST - ZIP	NEPEAN, ONTARIO CA
TITLE	DV
NAME	BURNS, BRIAN P
STREET ADDRESS	2103 GULF DR.
CITY - ST - ZIP	BRADENTON BEACH FL 34217
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D/P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	SALLY, ROBERT J
13 STREET ADDRESS	13 STAPLEDON CRESCENT
14 CITY - ST - ZIP	NEPEAN, ONTARIO CA
21 TITLE	DIS/T. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	SALLY, KAREN
23 STREET ADDRESS	2103 GULF DR.
24 CITY - ST - ZIP	BRADENTON BEACH FL 34217
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	908001-466393 <input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	-04/27/95--01039--024
43 STREET ADDRESS	***1800.00 ***200.00
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if checked, or on an attachment with an address.

SIGNATURE: *[Signature]* **March 16/95** **813-778-7900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Type in Block 2)