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FILED
Mar 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # V55026

(1)

1. Corporation Name

G.O. INVESTMENTS, INC.



Principal Place of Business

Mailing Address

~~MM-605 OVERSEAS HIGHWAY-
ISLAMORADA FL 33096~~

5055 BUENA VISTA AVENUE
MELBOURNE FL 32934
US

5055 Buena Vista Av
Melbourne FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/04/1992

2. Principal Place of Business

2a. Mailing Address

21 5055 Buena Vista Av

26 Suite, Apt. #, etc.

4. FEI Number

65-0349960

Applied For

Not Applicable

22 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

23 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23 Melbourne FL

28 City & State

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

24 Zip

25 Country

29 Zip

30 Country

24 32934

25 Brevard

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OLNEY, GARY

~~4711 MASON TERRACE~~ 5055 Buena Vista Av
MELBOURNE FL ~~32934~~ 32934

81 Name

Gary Olney

82 Street Address (P.O. Box Number is Not Acceptable)

5055 Buena Vista Av

83

84 City

Melbourne

FL

85 Zip Code

32934

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE

☐ Change ☐ Addition

NAME OLNEY, GARY J
STREET ADDRESS 5055 BUENA VISTA AVE
CITY-ST-ZIP MELBOURNE FL

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE

2.1 TITLE

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 attachment with an address.

SIGNATURE *Gary Olney*

407 255 7271

CR2E034 (1097)