

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

DOCUMENT # 003000

1. Corporation Name

Gulf Trading of Carralelle, Inc

Principal Place of Business

Mailing Address

P.O. Drawer 1336 138 Idaho St.
Carralelle, Fl. 32322 Janardh V. Village, FLA. 32322

2. Principal Place of Business

2a. Mailing Address

21 Same
Suite, Apt #, etc.
22 138 Idaho St.
City & State
23 Carralelle, FL
Zip Country
24 32322 25 USA
29 30

9. Name and Address of Current Registered Agent

William E. Pope
138 Idaho St
Carralelle, Fl. 32322

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE P.O. President
NAME WILLIAM E. POPE
STREET ADDRESS P.O. Box 1336 N/A
CITY-STATE-ZIP Carralelle, FL 32322
TITLE Sec. D. George T. Hull, Jr.
NAME
STREET ADDRESS 694 Myrtle Ridge, Driven
CITY-STATE-ZIP CONWAY, S.C. 29526
TITLE V.D. Henry George
NAME
STREET ADDRESS P.O. Box 4 N/A
CITY-STATE-ZIP Fyffla, FLA
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13.

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

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****158.75****158.75

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, with all other line empowered

SIGNATURE: William E. Pope
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-7-99

Date

Daytime Phone #

FILED

99 JUN -7 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

7-14-05

4. FEI Number

59-2967839

Applied For
Not Applicable

5. Certificate of Status Desired

[X]

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

[]

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible-
Personal Property Tax.

[] Yes

[X] No

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

CR2E034 (11/98)

AD

6-~~7~~-99

I, William Lope, did not
receive the annual Corporate
report.

Sign, William Lope, Pres.