## FILE NOW: FILING FEE AFTER MAY 1 15 \$550:00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 289601

(7)

THE GALE COMPANY

Principal Place of Business

Mailing Address

9122 SW 78 PLACE

## **FILED** May 16 1997 8:00am Secretary of State



MIAMI FL 3315		MIAMI FL 3	3156-7537	-					
						02/08/1965 03/2		te of Last Report	
2. Principal Place of Business		2a. Mailing	28. Mailing Address			4. FEI Number			plied For
Suite, Apt. #, etc.		26 Suito A	Suite, Apl. #, etc.					t Applicable	
22		h1	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	0	City & S				6. Election Campaign Financing		\$5.00	· · · · · · · · · · · · · · · · · · ·
23		28				Trust Fund Contribution		Added 1	
Zip	Country	i kin i		Country	y	8. This corporation has liability for i	intangible t	ax under s.	199.032,
24	25 Name and Addres	29   ss of Current Registered Ag	ent	[30]		10. Name and Address of New Re	Yes [		
CAI	E, STEPHEN	ou or our out to grace to ag		81	Name	10. Maine and Addiese of New Yea	gistores	gork	
	2 S.W. 78TH PL.			82	Cleant Ad	dress (P.O. Box Number is Not Acceptate			
	MI FL 33156			02	Sireet Ao	oress (F.O. Box Number is Not Acceptab	ole)		
				83					
				84	City			85 Zip (	Code
44 6			AT 131 60 T				FL	<u> </u>	
11. Pursuant I office or re agent. Las	to the provisions of Secti egistered agent, or both m familiar with, and acce	ions 607.0502 and 607.1508, , in the State of Florida. Such ept the obligations of, Section	phange was a 607.0505, Flo	es, the abov authorized b orida Statulo	re-named co ly the corpor ls.	rporation submits this statement for the p ation's board of directors. I hereby accep	ourpose of of the appo	intment as	s registered registered
SIGNATURE	<del></del>	. ar sast the constant of the sast							
12.		of registered agen, and title it applicable FFICERS AND DIRECTORS	). (NOI	1 13,	ent signature req	when reinstating)  ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 12
TITLE	PD		DELETE	1.1 TOLE				Change	Addition
NAME	GALE, STEPHEN			1.2 NAME					
STREET ADDRESS	9122 S.W. 78TH PL	••		1.3 STREE	1 ADDRESS				
CITY-ST-ZIP	MIAMI FL 33158			14 CHY	S1 - ZIP			<u></u>	
TITLE	SD CALE IANIOE	Į	DELETE	211MLF	}			Change	Addition
NAME	GALE, JANICE 9122 S.W. 78TH PL			22 NAME		· ·			
STREET ADDRESS	MIAMI FL 33156	L.		23 STRIE	1 ADDRESS	•			
CITY-ST-ZIP TITLE	HIDWIN 1 E OO 100		DELETE	31 1111	-51 - 211			Change	Addition
NAME				3.2 NAME	1		•	- J	
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP				3.4. CDY-					
TITLE			DELETE	4.1 1				Change	Addition
NAME				4. 2 NAM	1				
STREET ADDRESS		•			1 ADDRESS				,
CITY-ST-ZIP TITLE			DELETE	4.4-CITY- 5.1 TITLE	S1-ZIP			Change	Addition
NAME		ι	D.CC   L	5.1 THUE 5.2*NAME					ر Addition رے
STREET ADDRESS					LADDSESS .				
City-ST-ZIP				5.41CITY-					
TITLE			DELETE	6171111		. ,		Change	Addition
NAME				6.2 NAME	j				
STREET ADDRESS	-			6.3 \S1#E6	1 AFIDRESS				
CITY-ST-21P				6.4 JCI1Y -	\$1 - 7(P				,tt

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutos. 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