2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 336595					FILED Aug 29, 2001 8:00 am Secretary of State			
1, Entity Nam		50	(08-29-2001 90011			
Principal Place of Business C/O 2500 N MIAMI AVE MIAMI FL 33127		Mailing Address C/O 2500 N MIAMI AVE MIAMI FL 33127	C/O 2500 N MIAMI AVE		auus 2692			
2. Principal P	Place of Business	3. Mailing Address	•					
Suite, Apt.	#, etc.	Suite, Apt. #,.etc			DO'NOT WRITE IN TH	IS SPACE		
City & Stat	e	City & State		4.	FEI Number 59-1233539	<u> </u>	plied For	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Add Fee Require		
<u></u>	6. Name and Address of Currer	nt Registered Agent	Name	7. 1	Name and Address of New Register			
gaffin,h/ 2500 n mi				ess (P.O. Box Number is Not Acceptable)				
MIAM! FL :	33127		City		F	Zip Cod	e	
8. The above	named entity submits this statement	for the purpose of changing its	registered office or re	gistered ag	gent, or both, in the State of Florida.			
SIGNATURE .	Signature, typed or printed name of registered age	int and title if applicable. (NOT	E: Registered Agent signature r	equired when r	einstating) DA1	E		
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)		After September 12	After September 12, 2001 Fee will be \$750. Make Check Payable to Department of Sta		.00 Trust Fund Contribution Added to Fees			
11.			12.	A	DDITIONS/CHANGES TO OFFICERS A			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Gaffin,Harold 2000 S. Bayshore Dr. Villa Coconut grove FL	Delete 59	TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		Change	Addition	
IITLE NAME STREET ADDRESS	D Gaffin, Jill 2000 S. Bayshore Dr. Villa	Delete	TITLE NAME STREET ADDRESS			Change	Addition	
CITY-ST-ZIP	COCONUT GROVE FL		CITY-ST-ZIP	<u>. </u>				
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			🗌 Change	Addition	
TITLE VAME STREET ADDRESS+		Delete	TITLE NAME STREET ADDRESS	~		Change	Addition	
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
ITLE IAME TREET ADDRESS	· · ·	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
indicated	certify that the information supplied wi on this report or supplemental report poration or the receiver or trustee em	is true and accurate and that r	CITY-ST-ZIP r the exemption stated ny signature shall have	the same	119.07(3)(i), Florida Statutes. I further legal effect as if made under cath; that	t I am an officer	or director	

August 1, 2001

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APADULA

CERT P ACCOUN

529.9300 FACSIMILE 305 529.0012 EMAIL Papadula.com

Florida Department of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302

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Re:

Gibralter Finance Corp. FEI #59-1233539

A0082852 336595

To Whom it May Concern:

I am corresponding on behalf of our above-referenced client in connection with the assessment of a penalty for the late filing of the 2001 Uniform Business Report (UBR). According to our client, they never received the first UBR form requesting the \$150.00 filing fee. Our client has never been late filing these forms before; therefore we would like to request the Florida Department of State, Division of Corporations to waive all penalties assessed.

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If you have any questions, please do not hesitate to contact me.

Very truly,

Maria Baldun

Maria Baldwin