PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 340311

GORDON PLANTATION DRUGS INC

FILED Feb 08, 1999 8:00am Secretary of State

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Principal Place	e of Business	Mailing A	Address						
4330 W BROW			BROWARD BLVD						
PLANTATION FI	L 33317	PLANIAII	ION FL 33317				DO NOT WRITE IN THIS S	PACE	
		•					3. Date Incorporated or Qualifed		Ì
							01/20/1969		
	lace of Business	2a. Maili	ng Address				4. FEI Number		ied For
21		26		<u></u>			59-1229794	\$8.75 Ac	Applicable
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.				5. Certifcate of Status Desired	Fee Req	
22	<u> </u>	27 City.	& State				6. Election Campaign Financing	_\$5.00 N	
— ·	ei	28 28	_ ·			م معترضها المساحدة المساحدة	Trust Fund Contribution Added to Fees		
Zip	Country	Zip					8. This corporation owes the current year Intangible		
24	25 29 30			30			Personal Property Tax. Yes No		
	9. Name and Address of Curre	nt Registered	Agent				10. Name and Address of New Registered A	gent	
		:			81	Name			
LEACH,MARTIN GO 4330 W BROWARD BLVD					82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33314					83	<u></u>			1199171
		•			84	City			
1		4	<u> </u>				<u> </u>		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.150	08, Florida Statut	es, the a	above d by	e-named corpo the corporation	oration submits this statement for the purpose of c n's board of directors. I hereby accept the appoint	nanging its r tment as reg	egistered istered
agent. La	egistered agent, or both, in the State im familiar with, and accept the oblig	ations of, Secti	on 607.0505, Flo	rida Stat	tutes				
SIGNÀTURE	*					17	when reinstating)		
40	Signature, typed or printed name of registered age	ent and title if applica		13.		it signatule required	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	PD	TO DIKEDIO	DELETE	_	TILE		51. 117 AVS	Change '	Addition
NAME	GUTTMAN, JEROME			1.2 N	AME				
STREET ADDRESS	ACCOUNT DECIMADE BLAD			1.3 \$	TREET	TADDRESS			
CITY-ST-ZIP	PLANTATION FL			1.4 C	CITY-S	T-ZIP			
TITLE	VD		☐ DELETE	24 T					
NAME	LEACH,MARTIN		—	2.11	MLE			☐ Change	Addition
STREET ADORESS	4000 MEDDOWADD DIVID		—		ntle Name			Change	Addition
0001.07.70	4330 W. BROWARD BLVD			2.2 N	NAME	T ADDRESS		☐ Change	Addition
CITY-ST-ZIP	PLANTATION FL			22 N 23 S 2.4 (NAME STREET CITY-S				
TITLE ; (F4)	PLANTATION FL		☐ DELETE	2.2 N 2.3 S 2.4 C	NAME STREET CITY-S TITLE			☐ Change	Addition
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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 angular 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 of 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 attagraphy with an address, with all other like empowered.

SIGNATURE

SICANA AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-258-2211

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