FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

518752

(1)

FILED May 13 1998 8:00am Secretary of State

GASCO, INC.					
Salarata al Direc	at Division	AA-it Add			(18) (18) (18) (18) (18)
Principal Plac		Mailing Address			
3155 NW 77TH AVE 8TH FLOOR		3155 NW 77TH AVE 8TH FLOOR			
MIAMI FL 33122		MIAMI FL 33122		DO NOT WRITE IN THI	S SPACE
US		US		3. Date Incorporated or Qualified	
	_			11/18/1976	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	•·····	59-1876114	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 1	<u> </u>	27 // 4			Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28] Zip	Country	Trust Fund Contribution	Added to Fees
24	25		30	8. This corporation owes or has paid the operation of the personal Property Tax due June 30.	Current year Intangible Yes X No
[24]	9. Name and Address of Currer	and the same of the same and th	[30]	10. Name and Address of New Registere	
	T CORPORATION SYSTEM		81 Name		
	200 S. PINE ISLAND ROAD				
1	LANTATION FL 33324		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
'	Dillimon i C 000E4		83		
			84 City	F	L 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the purpose	of changing its registered
office or r	e giste red agent, or both, in the State m fam iliar with, and accept the oblice	of Florida, Such ch ange was a alions of Section 60 7.050 5, Flo	authorized by the corpora orida Statutes	tion's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE					
SIGNATURE	Signature, typed or printed name of regelered aur	ne and the diagrah able (NOT)	: Registered Agent signature requi	ired where roinstating) DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	MAS, JORGE		1.2 NAME		
STREET ADDRESS	3155 NW 77TH AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	DELETE	1.4 CITY - ST - ZIP		Change Addition
TITLE	PD DEDENA ICMAE		2.1 TITLE		CT change CT vocition (
NAME	PERERA, ISMAEL 3155 NW 77TH AVE		2.2 NAME		
STREET ADDRESS	MIAMI FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VTD VTD	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	VALDES, CARLOS	L_J DECERT	3.2 NAME		change radiiioit
STREET ADDRESS	3155 NW 77TH AVE		3.3 STREET ADDRESS		1
,	MIAMI FL		3.4. CITY-ST-ZIP		ŀ
CITY-ST-ZIP TITLE	S	DELETE	4.1 TITLE		Change Addition
NAME	DAMON, NANCY	<u> </u>	4. 2 NAME		
STREET ADORESS	3155 NW 77TH AVE		4.3 STREET AUDRESS		
CITY-ST-ZIP	MIAMI FL		4.4 CITY - S1 - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME		—	5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST - ZIP		1
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY+S1+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, gurd an attachment with an address.

CICALATURE

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