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

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May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (8)585026 **GLAT DEVELOPMENT CORPORATION** Principal Place of Business Mailing Address 520 N.W. 10TH AVENUE P.O. BOX 8523 FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33310-8523 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/31/1978 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1859542 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intengible 25 Personal Property Tax due June 30. Yes □ No 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FLOYD, ALZEN F., SR. 520 N.W. 10TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33311 **B3** 84 Zip Code 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 reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 13. TITLE DELETE 111111 Change Addition alzen, floyd f sr. NAME 1.2 NAME 520 N.W. 10TH AVE. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33311 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NORRIS, NORMA S NAME 2.2 NAME 3341 NW 5TH PL STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL 33311 CITY-ST-ZIP 2.4 CITY - ST-ZIP TITLE DELETE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 41 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE Change Addition 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS COTY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or open attacts fight with an address.

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