

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

*Doc #*

DOCUMENT # **586922** (7)  
1. Corporation Name  
**GORDON DEVELOPMENT CORP.**



Principal Place of Business: **5675 S.W. 35TH AVE. HOLLYWOOD FL 33021 US**  
Mailing Address: **5675 S.W. 35TH AVE. HOLLYWOOD FL 33021 US**

3. Date Incorporated or Qualified: **09/19/1978**  
3a. Date of Last Report: **05/01/1995**  
4. FEI Number: **59-1933042**  
Applied For:  Not Applicable  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

21. Principal Place of Business: Suite, Apt. #, etc. City & State Zip Country  
22. Suite, Apt. #, etc. City & State Zip Country  
23. City & State Zip Country  
24. Zip Country 25. Country 26. Zip Country 27. Suite, Apt. #, etc. City & State Zip Country 28. City & State Zip Country 29. Zip Country 30.

9. Name and Address of Current Registered Agent  
**DECKELBAUM, GORDON  
5675 S.W. 35TH AVE.  
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent  
81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City **FL** 85. 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: \_\_\_\_\_ (NOTE: Registered Agent's signature required when re-registering) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>PST</b>	<input type="checkbox"/> DELETE
NAME	<b>DECKELBAUM, GORDON</b>	
STREET ADDRESS	<b>4444 PLAYER ST.</b>	
CITY - ST - ZIP	<b>HOLLYWOOD, FL 00000</b>	
TITLE	<b>V</b>	<input type="checkbox"/> DELETE
NAME	<b>DECKELBAUM, YETTA</b>	
STREET ADDRESS	<b>4430 CASPER COURT</b>	
CITY - ST - ZIP	<b>HOLLYWOOD FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>PST</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Deckelbaum, Gordon</b>	
1.3 STREET ADDRESS	<b>5675 SW 35th Avenue</b>	
1.4 CITY - ST - ZIP	<b>Hollywood, FL 33312</b>	
2.1 TITLE	<b>V</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>Deckelbaum, Yetta</b>	
2.3 STREET ADDRESS	<b>5675 NW 35th Avenue</b>	
2.4 CITY - ST - ZIP	<b>Hollywood, FL 33312</b>	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_ DATE: **3/29/96** DAY: **954 9836310**

CR2E034 (12/95)