

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

PROFIT-CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Gordon P. McArthur
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **644980** (5)

GUNDERLIN LTD., INC.



1. Name of Corporation: **GUNDERLIN LTD., INC.**
 2. Principal Office: **3625 E 11TH AVENUE HIALEAH FL 33013**
 3. Mailing Office: **3625 E 11TH AVENUE HIALEAH FL 33013**

2. Foreign Principal Office: 21 _____
 22 _____
 23 _____
 24 _____
 25 _____
 26. Mailing Address: _____
 27 _____
 28 _____
 29 _____
 30 _____
 9. Name and Address of Current Registered Agent

**BASS, IRMA
3625 EAST 11TH AVENUE
HIALEAH FL 33013**

3. Date Incorporated or Qualified: **11/01/1979**
 3a. Date of Last Report: **04/28/1995**
 4. FEI Number: **59-0691691**
 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

10. Name and Address of New Registered Agent
 81 Name: _____
 82 Street Address (P.O. Box Number if Not Acceptable): _____
 83 _____
 84 City: _____
 FL 85 Zip Code: _____

11. I, the undersigned, as a duly qualified agent of the above named corporation, hereby accept the appointment as registered agent under the provisions of Chapter 607, Florida Statutes, and I hereby accept the appointment as registered agent under the provisions of Chapter 607, Florida Statutes.

12. OFFICERS AND DIRECTORS

CD	[] DELETED
BASS, IRMA 3625 E 11TH AVE HIALEAH, FL 00000	[] DELETED
D	[] DELETED
BASS, KALMAN 3625 E 11TH AVENUE HIALEAH, FL 00000	[] DELETED
PD	[] DELETED
BASS, JAY 3625 E 11TH AVE HIALEAH FL	[] DELETED
STD	[] DELETED
KISLAK, LYNN 3625 E 11TH AVENUE HIALEAH FL	[] DELETED
[] DELETED	[] DELETED
[] DELETED	[] DELETED

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	[] Change [] Addition
1. STREET ADDRESS	[] Change [] Addition
1. CITY STATE ZIP	[] Change [] Addition
2. NAME	[] Change [] Addition
2. STREET ADDRESS	[] Change [] Addition
2. CITY STATE ZIP	[] Change [] Addition
3. NAME	[] Change [] Addition
3. STREET ADDRESS	[] Change [] Addition
3. CITY STATE ZIP	[] Change [] Addition
4. NAME	[] Change [] Addition
4. STREET ADDRESS	[] Change [] Addition
4. CITY STATE ZIP	[] Change [] Addition
5. NAME	[] Change [] Addition
5. STREET ADDRESS	[] Change [] Addition
5. CITY STATE ZIP	[] Change [] Addition
6. NAME	[] Change [] Addition
6. STREET ADDRESS	[] Change [] Addition
6. CITY STATE ZIP	[] Change [] Addition

14. I, the undersigned, being the authorized signatory with full power and authority, hereby certify and do not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included in this annual report or if applicable other annual report is true and accurate and that my signature shall have the same legal effect as if made under the hand and seal of the Secretary of State. The undersigned is duly empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this form as an officer or director of the corporation.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-96 305-696-607

CR2E034 (12/95)