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

▶PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 691152

GULF COAST REALTY INVESTORS, INC.

Principal Place	e of Business	Mailing Address		1 (84119 01118 1881 11981 11801 31119 1101 0101	II WINIR KINII NIBIL WANK NEDIJ 1801
4214 FAIRWAY RUN		% HERB SWARZMAN 4214 FAIRWAY RUN TAMPA FL 33624		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualifed	
3 Dringing D	lone of Punings	2a Mailing Address		06/19/1981 4. FEI Number	Auntied Fee
<u> </u>	lace of Business	2a. Mailing Address		59-2119372	Applied For Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Additional
22	.,, 5.5.	27		5. Certifcate of Status Desired	Fee Required
City & Stat	е	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	
24	25	29	30	Personal Property Tax. 10. Name and Address of New Registere	Yes No
Name and Address of Current Registered Agent			81 Name	10. Name and Address of New Negisters	a Agent
SWA	D7MAN HEDR	***			
4214	FAIRWAY RUN	•	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
TAM	PA FL 33624		83		Basis Apan
			04 07		- 85 Zip Code
			84 City	, . F .	L 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				:	
	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE	E: Registered Agent signature require	ed when reinstating) DATE	
		•••			
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	•••	13. 1.1 TITLE		AND DIRECTORS IN 12 Change Addition
TITLE	PD Swarzman, Herb	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME STREET ADDRESS	PD Swarzman, Herb 4214 Fairway Run	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SWARZMAN, HERB 4214 FAIRWAY RUN TAMPA, FL 00000	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD SWARZMAN, HERB 4214 FAIRWAY RUN TAMPA, FL 00000 D BLUM, SAMUEL J	ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFFICERS	☐ Change ☐ Addition
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CITY-ST-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, by on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

FILED

Feb 12, 1999 8:00am

Secretary of State

A CARANA BANCE ERCAN NABA NABA BANCE KIRN BIBU BARAN BERKIR BARAN BIRKI BIRKI BIRKI BIRKI KARA

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