

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

FILED

GIBR7C  
NOTIFY  
GIBRA  
513  
SEBAS

Apr 30 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F08477

(4)

1. Corporation Name

GIBRALTER CAPITAL CORPORATION

Principal Place of Business

8700 NW 47 DR  
CORAL SPRINGS FL 33067  
US

Mailing Address

8700 NW 47 DR  
CORAL SPRINGS FL 33067-1950  
US



2. Principal Place of Business

21 513 Benedictine Ter  
Suite, Apt. #, etc.

22

City & State

23 Sebastian Florida

Zip

24 32958

Country

25 USA

2a. Mailing Address

26 513 Benedictine Ter  
Suite, Apt. #, etc.

27

City & State

28 Sebastian, Florida

Zip

29 32958

Country

30 USA

3. Date Incorporated or Qualified

12/10/1980

3a. Date of Last Report

05/09/1996

4. FEI Number

59-2370666

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

9. Name and Address of Current Registered Agent

AGRILLO, FRED  
8700 NW 47 DR  
CORAL SPRINGS FL 33067

10. Name and Address of New Registered Agent

81 Name FRED Agrillo  
82 Street Address (P.O. Box Number is Not Acceptable)  
513 Benedictine Ter  
83  
84 City Sebastian FL 85 Zip Code 32958

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME AGRILLO, FRED  
STREET ADDRESS 8700 NW 47 DR  
CITY-ST-ZIP CORAL SPRINGS FL  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
Fred Agrillo  
513 Benedictine Ter  
Sebastian, FL 32958  
☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

14. I do 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, or on an attachment with an address.

SIGNATURE:

*[Signature]*

4-1-97

561-589-2714

CR2E034 (9/96)