

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 14, 2000 8:00 am**  
**Secretary of State**

02-14-2000 90044 023 \*\*\*158.75

**DOCUMENT # F39482**

1. Entity Name  
**GAETA DEVELOPMENT CO.**

Principal Place of Business 4114 NORTHLAKE BLVD. SUITE 101 PALM BEACH GARDENS FL 33410	Mailing Address 4114 NORTHLAKE BLVD. SUITE 101 PALM BEACH GARDENS FL 33410-6271
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3555 Northlake Blvd. Suite, Apt. #, etc.	3. Mailing Address 3555 Northlake Blvd. Suite, Apt. #, etc.
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City & State Palm Beach Gardens, FL	City & State Palm Beach Gardens, FL	4. FEI Number 59-2098090	Applied For Not Applicable
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Zip 33403	Country Palm Beach	Zip 33403	Country Palm Beach	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent <b>GAETA, LOUIS A. JR.</b> 4114 NORTHLAKE BLVD PALM BEACH GARDENS FL 33410		7. Name and Address of New Registered Agent Name Gaeta, Louis A., Jr. Street Address (P.O. Box Number is Not Acceptable) 3555 Northlake Blvd. City Palm Beach Gardens, FL Zip Code 33403	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)	<b>FILE NOW!!! FEE IS \$150.00</b> After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GAETA, LOUIS A. J 528 CORSAIR DRIVE N. PALM BCH. FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, VP, Chairman Gaeta, Louis A., Jr. 3555 Northlake Blvd. Palm Beach Gardens, FL 33403 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TREZZA, ARLINE R. 1302 OCEAN DUNES CIR. JUPITER FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Trezza, Arline R. 3555 Northlake Blvd. Palm Beach Gardens, FL 33403 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, T, D Gaeta, Neil J. 3555 Northlake Blvd. Palm Beach Gardens, FL 33403 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* VICE PRES. 2-7-00 561-627-1900  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)