May 07, 1999 8:00 am Secretary of State

05-07-1999 90157 039 \*\*\*150.00

## 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 # **F46463**

1. Corporation Name

GERSHMAN ENTERPRISES, INC.

Principal Place of Business Mailing Address % NAT GERSHMAN % NAT GERSHMAN 5408 FIRST AVENUE DRIVE NW 5408 FIRST AVENUE DRIVE NW DO NOT WRITE IN THIS SPACE **BRADENTON FL 34209 BRADENTON FL 34209** 3. Date Incorporated or Qualifed 09/29/1981 Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 59-2129865 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 28 23 Country Zip Country Zip 8. This corporation owes the current year Intangible ☐ Yes 30 Personal Property Tax. 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent GERSHMAN, NAT 82 Street Address (P.O. Box Number is Not Acceptable) 5408 FIRST AVENUE DRIVE, NW **BRADENTON FL 34209** 83 Zip Code 84 85 City 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 reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition 1.1 TITLE TITLE GERSHMAN, SANDRA 1.2 NAME NAME 1.3 STREET ADDRESS 5408 FIRST AVE DR NW STREET ADDRESS BRADENTON, FL 00000 1.4 CITY-ST-ZIF CITY-ST-ZIP Addition Change ☐ DELETE 2.1 TITLE TITLE CPD 22 NAME GERSHMAN, NAT NAME 2.3 STREET ADDRESS STREET ADDRESS 5408 FIRST AVE DR NW BRADENTON, FL 00000 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE ☐ Change Addition 4.1 TITLE TITL F 4.2 NAME NAME STREET ADDRESS 4 3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP □ D€LETE Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

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 on 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 stranged, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

□ DELETE

**SIGNATURE:** 

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9417467377 Daytime Prione #

☐ Change

☐ Addition

CR2E034 (11/98)