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

**PROFIT** CORPORATION ANNUAL REPORT

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

F63078

GBS PLANTATION, INC. Principal Place of Business Mailing Address 1111 LINCOLN ROAD 1111 LINCOLN ROAD SUITE 680 SUITE 680 DO NOT WRITE IN THIS SPACE MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 01/13/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2196720 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zø Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GOUDISS, MORTON R 1111 LINCOLN RD., #600 375 Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI BEACH FL 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registers. Lagout and title it apposable (NOTI Registereo Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DELETE ☐ Change Addition TITLE 1.1 TITLE BERN, MARLA NAME 1.2 NAME 1037-B NW 3RD ST. STREET ADDRESS 1.3 STREET ADDRESS HALLANDALE FL CITY-ST-ZIP 1.4 C(1Y - S1 - ZIP DELETE TITLE 2.1 1011.6 ☐ Change ☐ Addition NAME BERN. KENNETH 2.2 NAME 1037-B NW 3RD ST. STREET ADDRESS 2.3 STREET ADDRESS HALLANDALE FL CITY-ST-ZIP 2 4 CITY- \$1-ZIP DLLETE Change Addition TITLE 3.1 TITLE NAME **3.2 NAME** STREET ADDRESS 3.3 STREET ADDRESS

CITY-ST-ZIP 14. 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 supplicmental annual most 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 trusted suppowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 il changed, or on an attachment with an address

3.4 CHY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CHY+ST-ZIP

4.1 TITLE

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Apr 21 1998 8:00am

Secretary of State