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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED
Jan 15 1998 8:00am
Secretary of State

DOCUMENT # F63277 (0)											
GORE-	HAIGH S	ALES, INC.									
Principal Place of Business Mailing Address											
1126 S. FEOR	ERAL HWY		1	1126 S. FEDERAL HWY				}			
SUITE 178 SUITE 178								DO NOT WRITE IN THIS SPACE			
FI CAOD FC	33310			FT LAUD FL 33316				3. Date Incorporated or Qualified			
								01/15/1982			
2. Principal P	GORE-HAIGH SALES, INC. Principal Place of Business 1126 S. FEDERAL HWY SUITE 178 FT LAUD FL 33316 Principal Place of Business Suite. Apt #, etc. City & State Zip			cipal Place of Business 2a. Mailing Address							4. FEI Number Applied For
22			26					59-2141150 Not Applicable			
Suite. Apt #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional			
22				27				Fee Required			
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip		Country	- 201	Zip Country				8. This corporation owes or has paid the current year Intangible			
24		-	29	•	30	•		Personal Property Tax due June 30. Yes No			
	9. Name	and Address of Curre	nt Regis	stered Agent				10. Name and Address of New Registered Agent			
					İ	81	Name				
					i	82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
FT. LAUDERDALE FL 33315						83					
					ł	83					
					84 City FL 85 Zip Code						
11. Pursuant	to the provis	tons of Sections 607.05	02 and 6	607.1508, Florida Statut	es, the at	ove	e-named corp	poration submits this statement for the purpose of changing its registered			
agent. I a	m tamiliar wi	ith, and accept the oblig	gations o	f, Section 607.0505, Fl	orlda Stati	utes	i.	tion a board or directors, a hereby about the appointment as registered			
SIGNATURE											
12.	Signature, typed				13.	Age	nt signature requir	red when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PSD				1,1 T/1	LE		☐ Change ☐ Addition			
NAME	GORE-HAIGH, ALICE F. 1.2		1.2 NA	ME	}						
STREET ADDRESS 1121 S.W. 18TH STREET			1.3 ST		REET	ADDRESS	· }				
CITY - ST - ZIP				1.4 C/I	Y-57	r-ZIP					
TITLE		· · · · · · · · · · · · · · · · · · ·		LE		Change Addition C					
NAME	A CO. C. SALL A COMPANY OF THE SALL AS A CO. C.		2.2 NA	_							
STREET ADDRESS	PT 141DEDOALT EL		1		ADDRESS	7					
CITY - ST - ZIP TITLE			2, 4 CI 3.1 TIT		T-ZIP	Change Addition					
NAME)			3.2 NA		-	Lad Vilonigo Lad ridonale					
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					3.4. CI						
TITLE				DELETE	4.1 TIT	_		Change Addition			
NAME					4. 2 NA	ME					
STREET ADDRESS					4.3 STI	REET /	ADDRESS	į			
CITY-ST-ZIP		<u>.</u>			4.4 CIT	Y-ST	- ZiP				
TITLE				DELETE	5.1 TIT	LE	(Change Addition			
NAME					5.2 NA						
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP				DELETE	5.4 CIT		- ZIP	Change Addition			
TITLE				C DETER	6.1 TiT			Et cusude T1 waquilou			
NAME OTDEET ADDRESS					6.2 NAI		annacce	}			
STREET ADDRESS CITY-ST-ZIP					6.4 CIT		ADDRESS !				
	ertify that the	e information supplied v	vith this f	iling does not qualify fo				Section 119.07(3)(i). Florida Statutes, I further certify that the information			

I nerety certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.0/(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 changes of the product of the corporation of the receiver of 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 changes of the product of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: