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

**PROFIT** CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H29047

(8)

G&B SERVICES, INC.	
D	

**FILED** Jan 15 1997 8:00am Secretary of State



Principal Place of Bu	ranicas	Mailing Address									
3091 NW 28 STREET LAUDERDALE LAKES FL 33311			3091 NW 28 STREET LAUDERDALE LAKES FL 33311-2029								
				3.	3. Date Incorporated or Qualified 11/07/1984 3a. Date of Last Report 10/02/1996						
2. Principal Place of	Business	2a. Mailing Addr	ess			4.	FEI Number			Applied For	
21		26			·		59-2461080		<del></del>	Not Applicable	
Suite, Apt. #, etc.	, Apt #, etc. Suite, A		pt. #, etc.			5.	Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State				6.	Election Campaign Financing			May Be	
<b>23</b> Zip	Country	28 Zip		Country			Trust Fund Contribution  This corporation has liability for			to Fees	
24	25	29	30				Florida Statutes	] Yes [	No	8. 199.002,	
9, 1	Name and Address of Curre	nt Registered Agent				10.	Name and Address of New Re	gistered A	gent		
BASS, MA				81	Name						
3091 NW 28 STREET LAUDERDALE LAKES FL 33311				82	Street Add	dress (F	O. Box Number is Not Acceptat	ole)			
LAUDERD	ALE LANES PL 33311			63		<del></del>					
	•			В4		<u>., . ) :</u>			85 Zip	o Code	
L					,			FL		1	
11. Pursuant to the	provisions of Sections 607 05	02 and 607,1508, Flori	da Statutes, th	e above	e-named co	rporatio	on submits this statement for the popular of directors. I hereby acce	ourpose of	changing	its registered	
agent. I am fami	iliar with, and accept the obliq	gations of, Section 607	.0505, Florida	Statutes	5.	allo i a r	sourd of directors. Thereby dece	pr the appe	into monte	is registered	
SIGNATURE											
Signatie	r, typed or purted name of registered at	gent and fibe if applicable		tered Age	ent signature req		neinstating) ADDITIONS/CHANGES TO OFFIC	DATE PEDS AND	DIRECTO	DS IN 12	
TITLE P	CITICENS A	DIRECTORS		1 TITLE			ADDITIONS/OF IAMOES TO OF IR		Change		
	SS, MARK			2 NAME	}			•	3		
	1 NW 28 STREET				ADDRESS						
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NAME			6	2 NAME							
STREET ADDRESS			1	.3 STREET	ADDRESS					l	
CITY-ST-ZIP				6.4 CITY - 9	T- ZIP						

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. 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 Conference 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 charges of on an area or metal with an address.

SIGNATURE: