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

DOCUMENT #

Principal Place of Business

J64526

(3)

Mailing Address

G & B MARKETING, INC.

FILED Apr 07 1998 8:00am Secretary of State

% GARY MICHALOWSKI 7830 N.W. 47TH PLACE LAUDERHILL FL 33351		% GARY MICHALOWSKI 7830 N.W. 47TH PLACE LAUDERHILL FL 33351		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 03/30/1987	
2. Principal Pla		2a. Mailing Address		4. FEI Number Applied For	
21 <i>481 S</i>	Shadow Wood LN	26 481 Shadou	w Wood LA	/ 59-2808296 Not Applicate	
Suite, Apt. #		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required	
	I SPRINGS, FL	City & State 28 CORAL SPR		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip 24 <i>3</i> 307		29 <i>330</i> 7/	Country 30 USA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 🔀 No	
	g, Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
MICHALOWSKI, GARY 7930 N.W. 47TH PLACE LAUDERHILL FL 33321			81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 481 Shadow Wood LN		
			83		
			84 City 0	RAI Sprivム FL 85 Zip Code 33 07/ corporation submits this statement for the purpose of changing its registere	
office or re-	o the provisions of Sections 607.0502 : gistered agent, or both, in the State of n familiar with, and accept the obligati	l Flonda. Such change was a	uthorized by the corp	corporation submits this statement for the purpose of changing its registere location's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature hyped or printed name of regintered riginal	and the Louise ship (MOTE	Registered Agent signature	required when reinstating) DATE	
12.	OFFICERS AND	The state of the s	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	DELETE	1.1 TITLE	Change Addition	
NAME	MICHALOWSKI, GARY		1.2 NAME	• •	
STREET ADDRESS	7930 N.W. 47TH PLACE		1.3 STREET ADDRESS	481 Shadow Wood LN	
CITY+ST-ZIP	LAUDERHILL FL		14 CITY-ST-ZIP	481 Shadow Wood LN CORAL SPRINGS, PL 33071	
TITLE	VŠ	DELETE	21 TITLE	Change Addition	
NAME	MICHALOWSKI, BETTY		22 NAME		
STREET ADDRESS	7930 N.W. 47TH PLACE		23 STREET ADDRESS	481 Shadow Wood LN	
CITY-ST-ZIP	LAUDERHILL FL		2 4 CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TATLE		DELETE	3 1 TITLE	Change Addition	
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TIFLE		☐ DELETE	4.1 THTLE	Change Addition	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 C(TY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	Change Addition	
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE	Change Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP					
	while that the intermedian complete with	this there does not a relified	6.4 CITY-ST-ZIP	d in Castian 110 07(9)(i) Elevida Statutes Liturther partity that the information	

receives some our memormation supplied with this him groces not quality for the exemption stated in Section 119.0 ((3)(i)). Florida Statutes. I further certify that the information indicated on this annual report is experiented 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 changed, or on an attachment with an address.