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 #

K96471

(3)

GOLD COAST SCREEN SERVICE, INC.

FILED May 08 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address				AL BICH DIDII BIBII BIBIH DIDII 1081
SUITE 11	OCA RATON BLVD.	2960 N.W. BOCA RATO SUITE 11		٠	DO NOT WRITE IN	TUIC CDACE
BOCA RATON	I FL 33431	BOCA RATON FL 33431	BOCA RATON FL 33431		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
					06/16/1989	
2. Principal P	lace of Business	2 2a. Mailing Address			4. FEI Number	Applied For
21 1370 W. Industille 26 Sa					65-0128852	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					_	\$8.75 Additional
22 # 116 27					5. Certificate of Status Desired	Fee Required
City & State City & Star			e		6. Election Campaign Financing	\$5.00 May Be
23 Boyr	28			Trust Fund Contribution	Added to Fees	
Zip ()	Country	Zip	Count	try	8. This corporation owes or has paid t	
24 - (L 25 P. Beach	29	30]		Personal Property Tax due June 30	
	9. Name and Address of Currer	nt Registered Agent		1 Name	10. Name and Address of New Regis	tered Agent
	TLAND, SUSAN W.		°	11 Name	5ane	
8550 MW 49TH DR			Ē	2 Street Add	iress (P.O. Box Number is Not Acceptable)	
CORAL SPRINGS FL 33607			ļ.	13		
			•	13		
			Ē	4 City		85 Zip Code
44.6		1007 1000 5				FL S S S S S S S S S
office or r agent. I a	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accept the golig	Definition of Such change was atjours of Section 607.0505, I	lutes, the abo s authorized Florida Statul	by the corporates.	poration submits this statement for the purp tion's board of directors. I hereby accept the	nose of changing its registered to appointment as registered
SIGNATURE		cand a	SUPS		14/20	198
10	Signature, typoid or pointed name of registered age	ent and little if any Arcable (NA ID DIRECTORS	<u>-</u>	Agent signature requi		DATE
12.	PTD	DELETE	13. 1.1 TUTU		ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	DAVIS, GREGORY		1.2 NAM	1		CT overdo CT voorcon
STREET ADDRESS	5107 PINETREE DRIVE			ET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL			-ST-ZIP		
TITLE	\$D	DELETE	21 TITLE			Change Addition
	HETLAND, SUSAN		2.2 NAM			
	9300 NW 491H DR			ET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL			(-ST-ZIP		
TITLE	VD	DELETE	3 1 TITLI			☐ Change ☐ Addition
NAME	MYERS, TIMMIE D.		3.2 NAM	E		
STREET ADDRESS	1215 SEAVIEW		3.3 STRE	ET ADDRESS		
CITY-ST-ZIP	N. LAUDERDALE FL	,	3.4. CITY	r-ST-ZIP		
TITLE	Ō	DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	MYERS, GEORGE	,	4. 2 NAN	AE		
STREET ADDRESS	8550 NW 49TH DRIVE		4.3 STRE	ET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL		4.4 CITY	- ST - ZIP		
TITLE		☐ DELETE	5.1 T(TL)	:]		☐ Change ☐ Addition
NAME			5.2 NAM	E		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY			
TITLE		☐ DELETE	6.1 T(TLE			☐ Change ☐ Addition
NAME			6.2 NAM	E		
STREET ADDRESS	?		6.3 STRE	ET ADDRESS		
CITY-ST-ZIP		20.41.20	6.4 CITY			
14. I hereby of indicated	certify that the intermation supplied wo on this annual report of supplementa	ath this filing does not qualify all annual report is true and #	tor the exem ccurate and t	nption stated in that my signatu	Section 119.07(3)(i), Florida Statutes. I furture shall have the same legal effect as if ma	her certify that the information ade 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 change or on an attachment with an address.