

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L03756

1. Entity Name
GIMELSTOB ENTERPRISES, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAY -9 AM 9:46

Principal Place of Business
13080 MARSH LANDING
PALM BEACH GARDENS, FL 33418

Mailing Address
6231 PGA BOULEVARD
SUITE 104-#393
PALM BEACH GARDENS, FL 33418



02182008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0802107

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GIMELSTOB, HERBERT
13080 MARSH LANDING
PALM BEACH GARDENS, FL 33418

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	GIMELSTOB, HERBERT
STREET ADDRESS	13080 MARSH LANDING
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	DV
NAME	GIMELSTOB, ELAINE
STREET ADDRESS	13080 MARSH LANDING
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	V
NAME	EPSTEIN, WILLIAM L
STREET ADDRESS	2300 GLADES ROAD, SUITE 400 EAST
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Herbert Gimelstob
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-3-08

561 789/000

Date

Daytime Phone #

1130