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Apr 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L29776 (6)

1. Corporation Name  
EVA MARIE GOSTIN, INC.



Principal Place of Business  
14203 GLENMOOR DR.  
WEST PALM BEACH FL 33409

Mailing Address  
14203 GLENMOOR DR.  
WEST PALM BEACH FL 33409-2810

3. Date Incorporated or Qualified 11/13/1989  
3a. Date of Last Report 02/05/1996

2. Principal Place of Business  
21 315 Granada Road  
Suite, Apt. #, etc.  
22 City & State  
23 West Palm Beach, FL  
Zip Country  
24 33401 25 Palm Beach  
26 315 Granada Road  
Suite, Apt. #, etc.  
27 City & State  
28 West palm Beach, FL  
Zip Country  
29 33401 30 PalmBeach

4. FEI Number 65-0156850  
Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PAINE, JEFFREY A.  
1800 SOUTH AUSTRALIAN AVENUE-  
SUITE 204  
WEST PALM BEACH FL 33409-4997

10. Name and Address of New Registered Agent

81 Name Paine, Jeffrey A.  
82 Street Address (P.O. Box Number is Not Acceptable)  
500 S. Australian Avenue, Suite 120  
83  
84 City West Palm Beach, FL 85 Zip Code 33401

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP  
DP GOSTIN, EVA MARIA 14203 GLENMOOR DR. WEST PALM BEACH FL 33409  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP  
Gostin, Eva Maria 315 Granada Road West Palm Beach, FL 33401  
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP  
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP  
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP  
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP  
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 changed, or on an attachment with an address.

SIGNATURE: X [Signature] EVA-MARIA GOSTIN 3/19/97 PRES 655-9947  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)