

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2004 8:00 am
Secretary of State

03-23-2004 90013 026 ***150.00

DOCUMENT # L71470

1. Entity Name
GULFSTREAM ENVIRONMENTAL SERVICES, INC.



Principal Place of Business

**1530 CYPRESS DRIVE
SUITE H
JUPITER, FL 33469 US**

Mailing Address

**1530 CYPRESS DRIVE
SUITE H
JUPITER, FL 33469 US**

24027743



03172004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1933031

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FREEDOLD, JEFFERY
1060 HIGH SIERRA CIRCLE
WEST PALM BEACH, FL 33411**

**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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FREEBOLD, JEFFERY
STREET ADDRESS	7060 HIGH SIERRA CIR.
CITY-ST-ZIP	WEST PALM BEACH, FL 33411
TITLE	VP
NAME	FREEBOLD, GREGORY
STREET ADDRESS	1435 CARRIBEAN RD
CITY-ST-ZIP	WEST PALM BEACH, FL 33406
TITLE	T
NAME	FREEBOLD, CHARLES
STREET ADDRESS	2860 FLAMINGO LAKE DRIVE
CITY-ST-ZIP	WEST PALM BEACH, FL 33406
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-17-04

Date

5617442142

Daytime Phone #