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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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一年を作者は、司司、北京の衛司衛子を持ちます、いるの機はほどのほう

GOLD COAST PHONES, INC.

| FILED | | | | | | | | | | |
|--------|---------|----------|--|--|--|--|--|--|--|--|
| Jan 28 | 1998 | 8:00am | | | | | | | | |
| Secre | etary (| of State | | | | | | | | |

a nadaláli dal lálal slába hálla jálal lálál slábi aláli slábi slábi aláli áláli lábi.

| | | | | | | | | İ | | | | | |
|---|--|---|--|--|---|----------------------------|-----------------------------------|-----------|--|-------------------------|------------------------------|-----------------------------|--|
| Principal Place of Business Mailing Address | | | | | | | | | - 1 10031011 001 10111 01063 10110 10111 1001 91011 03011 91011 01011 01311 B1011 1001 | | | | |
| C/O STEVEN W. PRISTAS 12531 SW 115 AVE MIAMI FL 33176 US | | | C/O STEVEN W. PRISTAS P O BOX 16-2096 MIAMI FL 33116-096 | | | DO NOT WRITE IN THIS SPACE | | | | | | | |
| | | | U\$ | | | | 3. Date Incorporated or Qualified | | | | | | |
| 2 Principal P | lace of Business | | 20 | Mailing Address | | | | | 06/29/1990 4. FEI Number | | | pplied For | |
| 21 | 400 01 2500 1000 | | 26 | (Welling Floral odg | | | | | 65-0204623 | | | ot Applicable | |
| Suite, Apt. | #. etc. | | 20 | Suite, Apt. #, etc. | | | | | 00 0204020 | F1 | | Additional | |
| 22 | | | 27 | . , , , | | | | | 5. Certificate of Status Desired | | 7 | equired | |
| City & Stat | е | | 7-1 | City & State | | | | | 6. Election Campaign Financing | | \$5.00 | May Be | |
| 23 | | | 28 | | | | | | Trust Fund Contribution | | • • | to Fees | |
| Zip | | Country | | Zip | Co | untr | y | | 8. This corporation owes or has pa | aid the cu | rrent year In | tangible | |
| 24 | 25 | | 29 | | 30 | 30 | | | Personal Property Tax due June 30. Yes No | | | | |
| | 9. Name and | Address of Curre | ent Regist | ered Agent | | 1 | T | | 10. Name and Address of New Re | gistered | Agent | | |
| P | ristas, steve | EN W | | | | 81 | Name | | | | | | |
| | 2531 SW 115 / | | | | | 82 | Street A | Address | s (P.O. Box Number is Not Acceptal | ole) | | | |
| M | 11AM) FL 33176 | } | | | | | | | | | | | |
| | | | | | | 83 | H | | | | | | |
| | | | | | | 84 | City | | | | 85 Zip | Code | |
| | | | | | | | | | | FL | • " | | |
| 11. Pursuant office or r agent. I a | to the provisions egistered agent, m familiar with a | of Sections 607.05 or both, in the Stat ind accept the obli | 02 and 60 e of Florid gations o | 7.1508, Florida Stati a. Such change was Section 607.0505, I | utes, the a s authorize Florida Sta | abov ed b stute | y the corp s. | oration | alion submits this statement for the particular of directors. I hereby acception | ourpose o ot the app | f changing i pointment as | ts registered registered | |
| SIGNATURE | _ Lle | nted name of regulated a | TM | ومصله | OTL: Boolston | od An | | GUE | We PRISTAR | DATE | 17/78 | | |
| 12, | Signature: inpod or pri | OFFICERS A | | | 13. | | con a griantie i | requied i | ADDITIONS/CHANGES TO OFFIC | | D DIRECTOR | 3S IN 12 | |
| TITLE | DP | | | DELETE | 111 | | | | | | Change | Addition | |
| NAME | | STEVEN W. | | | 1.2 N | IAME | | | | | _ | | |
| STREET ADDRESS | 12531 SW | | | | 1.3 5 | TREE | I ADDRESS | | | | | | |
| CITY-ST-ZIP | MIAMI FL | | | | 1.4 0 | HY- | ST - ZIP | | | | | | |
| TITLE | DS | | | ☐ DELETE | 2.1 T | | | | | | Change | Addition | |
| NAME | PRISTAS, | JUDITH A. | | | 2.21 | IAME | | | | | | | |
| STREET ADDRESS | 12531 SW | | | | 2.3 9 | TREE | ADDRESS | | | | | | |
| CITY-ST-ZIP | MIAMI FL | | | | 2.40 | CITY- | ST-ZIP | | | | | | |
| TITLE | DV | | | ☐ DELETE | 3.1 T | ITLE | | | | | Change | Addition | |
| NAME | SPRECHE | R, ROBERT C. | | | 3.2 N | AME | | | | | | | |
| STREET ADDRESS | 7462 SW | 166 TERR. | | | 3.3 9 | TREE | T ADDRESS | | | | | | |
| CHY-ST-ZIP | MIAMI FL | | | | 3.4 | CITY- | ST-ZIP | | | | | | |
| TITLÉ | DT | | | DELETE | 4.1 T | NLE | | | | | Change | Addition | |
| NAME | SPRECHE | r, marilynne s | :UE | | 4.21 | NAME | l | | | | | | |
| STREET ADDRESS | 7462 SW | 1 6 6 TERR. | | | 4.3 S | TREET | ADDRESS | | | | | | |
| CITY-ST-ZIP | MIAMI FL | | _ | | 4.4 0 | ITY-5 | ST-ZIP | | | | | | |
| TITLE | | | | DELETE | 5.1 T | ITLE | | | | | Change | Addition | |
| NAME | | | | | 5.2 N | AME | ļ | | | | | | |
| STREET ADDRESS | | | | | 5.3 S | TREET | ADDRESS | | | | | | |
| CITY+ST-ZIP | | | | | 5.4 0 | <u> ITY -</u> 5 | ST - ZIP | | | | | | |
| TITLE | | | | DELETE | 6.1 T | | | - | | | ☐ Change | Addition | |
| NAME | | | | | 6.2 N | AME | | | | | | | |
| STREET ADDRESS | | | | | 6.3 S | TREET | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | | 6.4 0 | ITY-S | ST-ZIP | | | | | | |

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under earl; 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: