

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L95426

FILED
Sep 28, 2004
Secretary of State

Entity Name: GULFSTREAM FINANCIAL GROUP, INC.

Current Principal Place of Business:

621 N.W. 53 ST., #320
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

621 N.W. 53 ST., #320
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 65-0212776 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POLIMENI, DOMINIC A
621 N.W. 53 ST., #320
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GUBITOSI, JOAN R.,
Address: 18540 LONG LAKE DR
City-St-Zip: BOCA RATON, FL 33496

Title: D (X) Delete
Name: POLIMENI, DOMINIC A.
Address: 6567 NEWPORT LAKE CR
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: POLIMENI, DOMINIC A PRES
Address: 6567 NEWPORT LAKE CR
City-St-Zip: BOCA RATON, FL 33496

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOMINIC A. POLIMENI

PRES

09/28/2004

Electronic Signature of Signing Officer or Director

Date