## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 08, 2004 8:00 am Secretary of State DOCUMENT # M33633 1. Entity Name 04-08-2004 90042 021 \*\*\*158.75 GULFSTREAM ADVERTISING, INC. Principal Place of Business Mailing Address C/O GEORGE M. IRVINE, JR. 2955 W. STATE ROAD #84 FT. LAUDERDALE FL 33312-7701 C/O GEORGE M. IRVINE, JR. 2955 W. STATE ROAD #84 FT. LAUDERDALE FL 33312-7701 2. Principal Place of Business 3. Mailing Address 2965 W. STATE ROM 2965 W. STATE BOND BY Suite, Apt. #, etc. Suite, Apt. #, etc CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-2683048 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GRORGE M. DULLE IRVINE, GEORGE M. JR. Street Address (P.O. Box Number is Not Acceptable) 2965 W ST RD 84 #84 2965 W. STATE ROAD 84 FT LAUDERDALE FL 33312 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. GEORGE M. DEVENE (III 4.6.04 (NOTE: Registered Agent signature required when reinstating) and title of applicable FILE NOW!!! FEE IS \$150.00 ... 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE DC Delete TITLE Addition NAME IRVINE, GEORGE M. JR. NAME 2965 W. STATE ROAD 34 2955 W. STATE RD. #84 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME COLLER, SCOT A NAME STREET ADDRESS 2965 W STATE RD 84 STREET ADDRESS FT LAUDERDALE FL CITY-ST-7IP CITY-ST-ZIE TITLE ☐ Delete TITLE ☐ Change Addition NAME IRVINE, JOAN M NAME STREET ADDRESS STREET ADDRESS 2965 W STATE RD 84 CITY-ST-ZIP FT LAUDERDALE FL CITY-ST-ZIP Delete PRESIDENT TITLE TITLE Change Addition CE. P.C. M. DIDE TIL NAME NAME STREET ADDRESS STREET ADDRESS 2965 W. STATE ROAD 84 CITY-ST-ZIP CITY-ST-ZIP FT. LAUBBRACE, FL 33312 Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP 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 eath; that I am an efficer 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 S COT M. COLLER

**FILED**