## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M43179

(4)

G.A.S.I. HOLDINGS, INC.

FILED								
May 18 1998 8:00an	1							
Secretary of State								

Principal Place 2655 LEJEUNE 807 CORAL GABLE 2. Principal Place 21 Suite, Apt. 8 22 City & State 23	ROAD ES FL 33134  ace of Business	Mailing Address 2655 LEJEUNE ROAD 807 CORAL GABLES FL 33134  28. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28	•		DO NOT WRITE IN THIS:  3. Date Incorporated or Qualified 12/15/1986 4. FEI Number 59-2791917 5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution	Ar.	May Be
Zip	Country	Zip	Country		8. This corporation owes or has paid the cur		_
24	25		30		Personal Property Tax due June 30.  10. Name and Address of New Registered		No
	9. Name and Address of Curren	r Negistered Agent	81	Name	10. Name and Address of New Registered	Agent	
807 265	Tes, Lester G., ESQ. Gables International Plaz 5 Lejeune Road Ral Gables Fl 33134	'A	82 83 84		dress (P.O. Box Number is Not Acceptable)	<b>85</b> Zip (	Code
office or re	o the provisions of Sections 607,0505 gistered agent, or both, in the State of familiar with and accept the obliga	of Florida. Such cha <b>nge was</b> a dions of, Section 60 <b>7.0505</b> , Flo	uthorized by rida Statutes	the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	changing it ointment as	s registered registered
	Signature, typed or protodinance of registerest tipe:			nt signature requ	uired when reinstating) DATE		
12.	OFFICERS AND	DELETE DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PD	ר"ו הנרנונ	1.1 TITLE	ţ		Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	ANIBAL, ILLUECA S. CALLE 52 NO 17 BELLA VIST PANAMA 1, R. P.	A, APTDO 1094	1.2 NAME 1.3 STREET 1.4 City-S				
TITLE	STD	DELETE	2.1 TITLE	1-215		Change	Addition
NAME	ANIBAL, ILLUECA H.	<del>-</del>	2.2 NAME			- "	
STREET ADDRESS	CALLE 52 NO 17 BELLA VIS		2.3 STREET	ADDRESS			
CITY-ST-ZIP	PANAMA 1, R. P.		2. 4 CITY - :	ST-ZIP			
TITLE	VS	DELETE	3.1 TITLE			Change	☐ Addition
NAME	KATES, LESTER G.		3.2 NAMF	}			
STREET ADDRESS	2655 LEJEUNE ROAD, SUITE	807	3.3 STREET	address			
CITY-ST-ZIP	ÇORAL GABLES FL	····	3.4. CI1Y - :	S1 - ZIP			
TITLE		☐ DELETE	4.1 THILE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET				
CiTY-ST-ZIP		Doctor	4.4 CITY - S	T- ZIP		Chacae	Addition
TITLE		L_J DELETE	5.1 TITLE	}		Change	Addition
NAME			5.2 NAME	ADDOLCC			
STREET ADDRESS			5.3 STREET				i
CITY+ST-ZIP TITLE		DELETE	54 CITY-S 61 TITLE	t - ZIY		Change	Addition
NAME		FT SEELE	6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - S				
14. I hereby of indicated of officer or of the control of the cont	on this annual report or supplementa lirector of the corporation or the rece or Block 13 if chapged or op an atlan	ll annual report is tru <b>e and acc</b> u river or trustoe empo <b>wered to</b> e	or the exemp	tion stated in at my signat	in Section 119.07(3)(i), Florida Statutes. I further ce ture shall have the same legal effect as if made un quired by Chapter 607, Florida Statutes; and that r	der oath; tha	atlam an
CICALAT	upe. \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	VX /VIII/			↑ = 1/= = ∀X		