PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90170 050 ***150.00

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1. Corporation Name

GERBER DEVELOPMENT, INC.

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Principal Place	e of Business		М	ailing Address					: 10016511 111 51511 61611 20115 4111	#1 F#15 #1#51 #41)17 6 1611	91911 611		
9400 SO DADELAND BLVD 9400 SO DADELAND BLVD					BLVD									
PH-5				PH-5										
MIAMI FL 33156				AMI FL 33156				<u> </u>	DO NOT WRIT	E IN THIS S				
US			US)					3. Date Incorporated or Qualifed 12/26/1986					
2. Principal P	lace of Business		2a	. Mailing Address				1	4. FEI Number		L	App	lied For	
21			26						59-2750516				Applicable	
Suite, Apt.	#, etc.		27	Suite, Apt. #, etc.					5. Certifcate of Status Desired			75 Ac ee Req	dditional uired	
City & Stat	e		28	City & State		•			6. Election Campaign Financing Trust Fund Contribution			.00 h	May Be Fees	
Zip	(Country	-	Zip		Country			8. This corporation owes the curre	nt year Inta	ngible			
24	25		29		30			1	Personal Property Tax.		Yes		∃No	
	9. Name and	Address of Currer	ıt Regis	stered Agent				1	0. Name and Address of New R	egistered A	gent			
250	ara ua. a a					81	Name							
GERBER, JACK B PA 9400 SO DADELAND BLVD						82	Street A	Address	(P.O. Box Number is Not Acceptal	ble)				
PH-5						83		_						
MIAI	MI FL 33156					84	City				85	Zip Co	ode	
							,			FL		·		
office or r	enistered agent ic	r both in the State	of Flori	607.1508, Florida St da. Such change wa f, Section 607.0505,	as autho	rized by	the corpo	corporati oration's	ion submits this statement for the population of directors. I hereby accept	t the appoin	nangir tment i	ig its r as regi	egistered istered	
SIGNATURE	Clausting hand or prin	ed name of registered age	at and title	(Anniloshia (A	VOTE: Regi	stored And	t symphics re	enured whe	n reinstating)	DATE				
12.	Signature, typed or prat	OFFICERS AN			I	13.	<u> </u>		ADDITIONS/CHANGES TO OFF	ICERS ANI	DIRE	CTOF	RS IN 12	
TITLE	DP			☐ DELETE	<u> </u>	1.1 TITLE		Γ		··· ·· ·· ·	Cha	inge	Addition	
NAME	GERBER, JAC	K B.				1.2 NAME								
STREET ADDRESS		LAND BLVD., PH	15			1.3 STREET	ADDRESS						}	
CITY-ST-ZIP	MIAMI FL					1.4 CITY-S	r-ZIP							
TITLE				☐ DELETE		2.1 TITLE					Cha	inge	☐ Addition	
NAME						2.2 NAME								
STREET ADDRESS						2.3 STREET	ADDRESS		•					
CITY-ST-ZIP	Ì				1	2. 4 CITY-S	T-ZiP							
TITLE				☐ DELETE	Ξ	3.1 TITLE					Cha	ange	☐ Addition	
NAME						3.2 NAME								
STREET ADDRESS					ı	3.3 STREET	ADDRESS							
CITY-ST-ZIP						3.4. CITY-S	T-ZIP							
TITLE				☐ DELETE		4.1 TITLE					☐ Cha	ange	Addition	
NAME						4. 2 NAME	İ	Ì					ļ	
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NAME						5.2 NAME								
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CITY-ST-ZIP						5.4 CITY-S	r-ZIP							
TITLE				☐ DELETE		6.1 TITLE	ļ				Cha	inge	☐ Addition	
NAME						6.2 NAME								
STREET ADDRESS						6.3 STREE	ADDRESS						ļ	
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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 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 12 or Block 13 if chapted, or on an attacoment with an address, with all other like empowered.

SIGNATURE:

W & Selle Jak B. Carber, Pres, 3/1/99 (305)670-30

;R2E034 (11/98)