May 10, 1999 8:00 am Secretary of State

05-10-1999 90104 048 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M70050

1. Corporation Name

G & S ADVERTISING INC.

a u o i	iovernoma, mo									
Principal Plac	DAVIE FL 33314 DAVIE FL 33329 US cipal Place of Business 2a. Mailing Address 26 Suite, Apt. #, etc. 27 & State Country Zip 25 9. Name and Address of Current Registered Agent PORTLEY, PETER A. 2401 EAST ATLANTIC BLVD SUITE #105 POMPANO BEACH FL 33062 resuant to the provisions of Sections 607.0502 and 607.1508, Florida Statuce or registered agent, or both, in the State of Florida. Such change was ent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statuce or registered agent, or both, in the State of Florida. Such change was ent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statuce or registered agent, or both, in the State of Florida. Such change was ent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statuce or registered agent, or both, in the State of Florida. Such change was ent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statuce or registered agent, or both, in the State of Florida. Such change was ent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statuce or registered agent, or both, in the State of Florida. Such change was ent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statuce or registered agent, or both, in the State of Florida.) (AMINATI EST LOGIE AMILI ANTEL ASTER		Eli Dibil Al	81)
6081 SW 30TH COURT		P.O. BOX 292037								
FT. LAUDERDALE FL 33314 DAVIE FL 33329							DO NOT WEST	. INC. TUBE	CDACE	
US US							DO NOT WRITE	IN THIS	SPACE	
							3. Date Incorporated or Qualifed			
· · · · · · · · · · · · · · · · ·	N	B Mailing Address					02/29/1988 4. FEI Number	<u>.</u>		Applied For
= ' · · · · · · · · · · · · · · · · · ·							65-0037909		H	Not Applicable
	#					0370037909		\$8.7	5 Additional	
	#, etc.					Certificate of Status Desired		-	Required	
City 9 Sto	to.				-	6. Election Campaign Financing			00 May Be	
´	ie .	⊢ ′				Trust Fund Contribution			ed to Fees	
23 Zip	Country				 -	8. This corporation owes the curren	it vear Int			
24	· ·	⊢ '	30				Personal Property Tax.	n your ma	Yes	□No
			30	$\overline{}$	·		10. Name and Address of New Re	gistered	Agent	······································
	5. Humb and Fiduless of June	it trogical at 1 igant		81	Name					
POF	RTLEY, PETER A.			_						
				82	Street A	Address (P.O. Box Number is Not Acceptable		le)		
SUIT	TE #105			83						
						_				
				84	City			FL	85 2	tip Code
office or i	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a ations of, Section 607.0505, Flo	iuthorizeo orida Stat	d by utes	the corpor	ation's	s board of directors. I hereby accept	the appoin	ntment as	registered
12.	rer		13.				ADDITIONS/CHANGES TO OFFI	CERS AN	D DIREC	TORS IN 12
TITLE	DST	☐ DELETE	1.1 TI	TLE					Chan	
NAME	FORMAN, CHRISTIE		1.2 NAME							
STREET ADDRESS	AE AED NE OUTE FOA		1.3 5	TREET	ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-		r-ZIP					
TITLE	VP	☐ DELETE	2.1 TI						Chan	ge 🔲 Addition
NAME	FLUTIE, GLENN		2.2 NAME							
STREET ADDRESS	AND A DINE IOL DD #405			•	ADDRESS					
CITY-ST-ZIP	PLANTATION FL		- 1	ITY-S	i i					
TITLE	TOURIST E	☐ DELETE	3.1 Ta						Chan	ge Addition
NAME			3.2 N	AME						
STREET ADDRESS	,				ADDRESS					
CITY-ST-ZIP	1			XTY-S						
TITLE		DELETE	4.1 T						Chan	ge 🗀 Addition
NAME				IAME						
STREET ADDRESS					TADDRESS					
	'[1							
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY- 5.1 TITLE		. 411				☐ Char	ge Addition
			5.2 N		Ì					
NAME CTREET ADDRESS	,				ADDRESS					
STREET ADDRESS				ITY-S						
CITY-ST-ZIP		☐ DELETÉ	6.1 Ti			<u></u>			☐ Chan	ge Addition
			6.2 N	AME					_	_ _
NAME					ADDRESS					
STREET ADDRESS	,		6.3 S	IKEE	AUURESS					

CITY-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 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 changed, or on as attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: _

4.78.99

Daytime Phone #