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

P92000010551 (9) DOCUMENT

IRON GATE GALLERY, INC.

FILED May 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Addre			ess			ı ranışıbar kını raviy sınış nasırı datiri datırı datık indir dasını dasını diribi diribi sadı			
112 S. PAL	5	112 S. PALAFOX PLACE							
PENSACOLA FL 32501					PENSACOLA FL 32501				
US		US				DO NOT WRITE IN THIS SPA	CE		
						3. Date Incorporated or Qualified 12/07/1992			
2. Principal	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	TT	Applied For	
21		26				59-3164845		Not Applicable	
Suite, Ap	ot. #, etc	Suite, Apt. #, etc.					$\rightarrow - \leftarrow$	Additional	
22		27				5. Certificate of Status Desired		Required	
City & Sta	ale	City & State				6. Election Campaign Financing	\$5.0	O May Be	
23		28				Trust Fund Contribution		d to Fees	
Zip	Couritry	Ζιρ	Cou	ntry		8. This corporation owes or has paid the current			
24	25	29	30	-		Personal Property Tax due June 30.		□ No	
	9. Name and Address of Curre		1001			10. Name and Address of New Registered Age			
R	HODES, JEANNETTE T			81	Name				
	14 S PALAFOX PL			\perp					
	ENSACOLA FL 32501			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
r	ENSACOLA FL 32301			83					
				63					
				84	City	IS	5 Zi	p Code	
				- 1	•	oration submits this statement for the purpose of cha	- []		
SIGNATURE	Signature, typed or pointed name of registered ag-			l Agen	l signature require	ed when reinstating) DATE			
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIF			
THTLE	BUODES JEANNETTE T	☐ DÉLETE	1.1 (1)			Ц	Change	Addition	
NAME	RHODES, JEANNETTE T		1.2 NA	ME					
STREET ADDRESS			1.3 \$1	reet a	DORESS				
CITY-ST-ZIP	PE NSACOLA FL		1.4 C(TY-ST-	ZIP				
TITLE		DELETE	2.1 717	LE			Change	e 🔲 Addition	
NAME			2 2 NA	ME					
STREET ADDRESS	s l		2.3 ST	REET A	DORESS				
CITY-ST-ZIP			2. 4 CI	TY- ST	- 219				
TITLE		DELETE	3 1 TIT	LE			Change	Addition	
NAME			3.2 NA	ME					
STREET ADDRESS	s		33 ST	REET A	DDRESS				
CITY-ST-ZIP			3.4. C(TY-ST	- 71P				
TITLE		DELETE	4 1 111				Change	: Addition	
NAME			4. 2 N/				•		
STREET ADDRESS	s				DDRESS				
CITY-ST-ZIP			4.4 CiT						
TITLE		☐ DELETE	5.1 717		LIT	П	Change	Addition	
NAME		_ 5.21,11	•				Sumite	- III MONITON	
			5.2 NA		D00500				
STREET ADDRESS	?				DORESS				
CITY-ST-ZIP		DELETE	5.4 CIT		ZIP				
TITLE		DELETE	6.1 1/1	LĒ		LJ	Change	Addition	
NAME			6.2 NA	ME					
STREET ADDRESS	S		6.3 ST	REET A	DDRESS				
CITY_ST_7IP			0.4.00	v er	710				

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 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 an attachment with an address.