

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthorn
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 8:23

DOCUMENT # P93000016077 (8)

1. Corporation Name

GAUSS GLOBAL TECHNOLOGIES CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

4073 MERCANTILE AVE.
NAPLES FL 33942

Mailing Address

4073 MERCANTILE AVE.
NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/03/1993

3a. Date of Last Report

08/01/1994

4. FEI Number

65-0411565

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under § 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

State, Apt. #, etc.

2a. Mailing Address

26

State, Apt. #, etc.

22. City & State

23

City & State

27. City & State

28

City & State

24. Zip

Country

29. Zip

Country

25

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ASHLEY, N R
1044 CASTELLO DR.
SUITE 106
NAPLES FL 33940

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0503, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent's Representative)

(Signature of Registered Agent or Registered Agent's Representative)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY & STATE

5. ZIP

6. TITLE

7. NAME

8. STREET ADDRESS

9. CITY & STATE

10. ZIP

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY & STATE

15. ZIP

16. TITLE

17. NAME

18. STREET ADDRESS

19. CITY & STATE

20. ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY & STATE

25. ZIP

26. TITLE

27. NAME

28. STREET ADDRESS

29. CITY & STATE

30. ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY & STATE

5. ZIP

6. TITLE

7. NAME

8. STREET ADDRESS

9. CITY & STATE

10. ZIP

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY & STATE

15. ZIP

16. TITLE

17. NAME

18. STREET ADDRESS

19. CITY & STATE

20. ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY & STATE

25. ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(4)(b), 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 registered agent or my duly authorized representative to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on this report in Block 1 of this report or on an attachment with an address.

SIGNATURE:

N Rex Ashley N Rex Ashley 4/24/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR