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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P93000050718 (4)

1. Corporation Name

CONSUL-TECH/GSAC CORP.

95 FEB 27 PM 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
30 EAST SAMPLE RD.
4TH FLOOR
POMPANO BEACH FL 33064

Mailing Address
50 EAST SAMPLE RD.
4TH FLOOR
POMPANO BEACH FL 33064

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/20/1993

3a. Date of Last Report
04/20/1994

4. FEI Number
65-0432283

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 S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip 25 Country

29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SIMON, ERIC A
800 CORPORATE DR.
SUITE 510
FORT LAUDERDALE FL 33334

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(If FEI Registered Agent signature required when constituting)

(Date)

12. OFFICERS AND DIRECTORS

T
NAME BLOOM, GARY G
STREET ADDRESS 50 E. SAMPLE RD., 4TH FLOOR
CITY-ST-ZIP POMPANO BEACH FL

S
NAME VRABEL, STEPHEN G
STREET ADDRESS 50 E. SAMPLE RD., 4TH FLOOR
CITY-ST-ZIP POMPANO BEACH FL

V
NAME GARGANTA, ANDRES
STREET ADDRESS 50 E. SAMPLE RD., 4TH FLOOR
CITY-ST-ZIP POMPANO BEACH FL

P
NAME MALLOL, CARLOS M
STREET ADDRESS 50 E. SAMPLE RD., 4TH FLOOR
CITY-ST-ZIP POMPANO BEACH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☒ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

5758 NW 62 TERRACE
PARKLAND, FL 33067

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(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 each person named, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or if an attachment with an address.

SIGNATURE:

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARY G. BLOOM

2-22-95

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