

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000050718

1. Entity Name

CONSUL-TECH/GSAC CORP.

**FILED**  
**Feb 15, 2000 8:00 am**  
**Secretary of State**

02-15-2000 90059 017 \*\*\*150.00

Principal Place of Business

Mailing Address

3141 COMMERCE PKWY  
MIRAMAR FL 33025

3141 COMMERCE PKWY  
MIRAMAR FL 33025-3944

2. Principal Place of Business

3141 Commerce Parkway

Suite, Apt. #, etc.

3. Mailing Address

SAME

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MIRAMAR, Florida

City & State

4. FEI Number

65-0432283

Applied For

Not Applicable

Zip

Country

Zip

Country

33025

US

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~VIABEL STEVE~~ VRABEL, STEPHEN G  
3141 COMMERCE PKWY  
MIRAMAR FL 33025

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S ☐ Delete  
NAME VRABEL, STEPHEN G  
STREET ADDRESS 5758 NW 62 TERRACE  
CITY-ST-ZIP PARKLAND FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME GARGANTA, ANDRES  
STREET ADDRESS 50 E. SAMPLE RD., 4TH FLOOR 9933 SW 21 ST.  
CITY-ST-ZIP POMPANO BEACH FL Miami, FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE P ☐ Delete  
NAME MALLOL, CARLOS M  
STREET ADDRESS 50 E. SAMPLE RD., 4TH FLOOR 11355 SW 72 CT.  
CITY-ST-ZIP POMPANO BEACH FL Miami, FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVE VRABEL

Date

1/10/00

Daytime Phone #

CR2E034 (9/99)