

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # P93000052107 (8)

95 FEB 24 PM 3:37

1. Corporation Name

GULF EQUITIES CORP.

Principal Place of Business

**ONE TURNBERRY PLACE
19495 BISCAYNE BLVD SUITE 902
NORTH MIAMI BEACH FL 33180**

Mailing Address

**ONE TURNBERRY PLACE
19495 BISCAYNE BLVD SUITE 902
NORTH MIAMI BEACH FL 33180**

DELIVER WITH RECEIPT TO:

3. Date Report of Status Required

07/26/1993

3a. Date of Filing

04/22/1994

2. Principal Place of Business

21 600 Corporate Drive

2a. Mailing Address

26 600 Corporate Drive

4. FEE Number

NOT APPLICABLE

Applied Fee

\$8.75 Additional Fee Required

Suite, Apt. #, etc.

22 Suite 512

Suite, Apt. #, etc.

27 Suite 512

5. Certificate of Status (Fees)

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6. Certificate of Status (Fees)

7. Certificate of Status (Fees)

8. This corporation has liability for state fees for new or renewed

Florida Statutes

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PALMIERI, THOMAS J
801 BRICKELL AVE
SUITE 1401
MIAMI FL 33131**

81. Name

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

83. City

84. State

85. Zip

FL

33131

11. Pursuant to the provisions of Sections 600.01(1)(b) and 607.15(1)(b), Florida Statutes, the above named corporation certifies that the person named as the registered agent for this corporation is a resident of this state or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, if properly, except that the agent must be a resident of this state or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, if properly, except that the agent must be a resident of this state or registered agent, or both, in the State of Florida.

SIGNATURE

Signature of the person named as the registered agent for this corporation

Signature of the person named as the registered agent for this corporation

12. OFFICERS AND DIRECTORS

13. ALTERNATE REGISTERED AGENTS

NAME	D. UELLEDAHL, SVEN D.
STREET ADDRESS	ONE TURNBERRY PL 19495 BISCAYN BLVD #902
CITY, ST, ZIP	NORTH MIAMI BEACH FL 33180
NAME	D. COLLINS, JOHN D.
STREET ADDRESS	ONE TURNBERRY PL 19495 BISCAYN BLVD #902
CITY, ST, ZIP	NORTH MIAMI BEACH FL 33180
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

NAME	D. UELLEDAHL, SVEN D.	☒
STREET ADDRESS	600 Corporate Drive, #512	
CITY, ST, ZIP	Ft. Lauderdale, FL 33334	
NAME	D. COLLINS, JOHN D.	☒
STREET ADDRESS	600 Corporate Drive, #512	
CITY, ST, ZIP	Ft. Lauderdale, FL 33334	
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I, the undersigned, certify that the information supplied with this report is true, correct, and complete, and that the person named as the registered agent for this corporation is a resident of this state or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, if properly, except that the agent must be a resident of this state or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, if properly, except that the agent must be a resident of this state or registered agent, or both, in the State of Florida.

SIGNATURE:

S. Uellendahl

Sven D. Uellendahl

01-27-95

305-492-9191

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICIAL OR DIRECTOR