## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 24, 2001 8:00 am Secretary of State DOCUMENT # P93000087122 1. Entity Name 05-24-2001 90006 021 \*\*\*150.00 GB HOLDINGS, INC. Principal Place of Business Mailing Address C/O KB HOLDINGS / 647 E. DANIA BCH BLVD C/O KB HOLDINGS / 647 E. DANIA BCH BLVD C0068980 DANIA BEACH FL 33004 DANIA BEACH FL 33004 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE % Atlantia Holdings % Atlantia Holdings 910 SE 17<sup>th</sup> St., Suite 300 910 S.E. 17th St., Suite 300 Applied For 4. FEI Number 65-0452929 Ft. Lauderdale, FL 33316 Ft. Lauderdale, FL 33316 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WAGNER, J J. Wagner C/O KB HOLDINGS % Atlantia Holdings 647 EAST DANIA BEACH BOULEVARD 910 SE 17th St., Suite 300 DANIA BEACH FL 33004 Ft. Lauderdale, FL 33316 Zip Code Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PSTD** Addition TITLE TITLE Delete Bailey, William A. NAME BOULIS, GUS NAME % Atlantia Holdings STREET ADDRESS STREET ADDRESS C/O KB HOLDINGS / 647 E. DANIA BCH BLVD 910 SE 17th St., # 300 CITY-ST-ZIP CITY-ST-ZIP DANIA BEACH FL 33004 Ft. Lauderdale, FL 33316 **X** Addition TITLE TITLE ☐ Delete NAME NAME Farrell, James B. 95 ATLANTIA HOLOING 5 910 SE 17th St., #300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Ft. Lauderdale, FL 33316 ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE L i Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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:

FILED