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

PROFIT CORPORATION ANNUAL REPORT



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

FILED Apr 23 1996 8:00 am Secretary of State

## 1996

DOCUMENT # P9400002251 (4)

GAYLA ASHLEY CORP.

Principal Place of Business	Mailing Address			
3518 S. DIXIE HWY. W. Palm BCH. Fl. 33405	P.O. BOX 6654	P.O. BOX 6654		Same and the light but a light light light
W. FRUM DOM: PE 90900	W. PALM BCH. FL 3:	3405-0654		
			<ol> <li>Date Incorporated or Qualifie 01/03/1994</li> </ol>	3a. Date of Last Report 05/01/1995
2. Principal Place of Business 1660 SOUTHERN BLVD.	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc	26		65-0463474	Not Applicat
<b>K</b>	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State   WEST PALM BEACH FL	City & State		6. Election Campaign Financino	Fee Required  \$5.00 May Be
Zip Couples	<b>28</b>	Country	Trust Fund ConInbution	Added to Fees
33406 25 US	29	30	8. This corporation has liability the Florida Statutes	for intangible tax under s. 199.032, yes. □ No
9. Name and Address of Curre	ent Registered Agent		10. Name and Address of Nev	
OSTRAND, ERIC V		81 Name		
3518 S. DIXIE HWY.		82 Street	AN OSTRAND ERIC Address (P.O. Box Number is Not Accep	table)
W. PALM BCH. FL 33405		83	660 SOUTHERN BL	VO_
			VITE K	
		84 City	VEST PALM BEACH	85 Zip Code
Pursuant to the provisions of Sections 607.050 or registered agent, or both, in the State of Flor	2 and 607.1508, Florida Statut			FL 85 Zip Code 33406
or registered agent, or both, in the State of Flor familiar with, and accent the obligations of, Sec	ida. Such change was authoriz tion 607 0505. Elorida Statutos	ed by the corporation's	board of directors. Thereby accept the a	ourpose of changing its registered of opointment as registered agent. Lam
NATURE THE WAY OF WAY	John State Clarities	s.		
	tand the factor oble (NC	TE Registered Apent signature	equired where resistancy	DAIf
OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO O	FICERS AND DIRECTORS IN 12
VAN OSTRAND, ERIC W	□ DELETE	1 1 11725	P.S	Change Addition
ET ADDRESS 3518 S. DIXIE HWY.		1 2 NAME	VAN OSTRAND, ERIC	W.
ST-ZIP W. PALM BCH. FL 33405		1.3 STREET ADDRESS	1660 SOUTHERN BLUD.	•
20100	☐ DELETE	1 4 CITY-ST-ZIP	WEST PALM BEACH I	FL 33406
	D pect is	2 1 THILE		Change Addition
ET ADDRESS		2.2 NAME		
ST-ZIP		2.3 STREET ADORESS		
	DELETE	2.4 CHTY - ST - ZIP 3.1 TITLE		
		3 2 NAME		Change Addition
T ADDRESS		33 STREET ADDRESS		
ST-ZIP		34 CITY - ST - ZIP		
	☐ DELETE	4 1 TITLE		
		4.2 NAME		Change Addition
TADDRESS		4.3 STHEET ADDRESS		
ST - ZiP		4.4.0-1Y-ST-ZiP		
	☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
ADDRESS		5 2 NAME		
ADDRESS ST - ZIP		5.3 STREET ADDRESS		
71 E0	———	5.4 City-St-ZiP		
	DELETE	6 1 TITLE		☐ Change ☐ Addition
ADDRESS		6 2 NAME		
ST-ZIP		63 STREET ADDRESS		
do hereby certify that the information or make di-	vith this filma is valuntarily furnic	6 4 CITY - ST - ZIP		
do hereby certify that the information supplied wo certify that the information indicated on this annu- path, that I am an officer or director of the corpor appears in Block 12 or Block 12 if			ly for the exemption stated in Section 119 urate and that my signature shall have the	07(3)(k), Florida Statutes, I further
path; that I am an officer or director of the corpor appears in Block 12 or Block 13 if changed, or or	allori or the receiver or trustee on attachment with an addres	empowered to execute ss.	this report as required by Chapter 607, F	lorida Statutes; and that my name
	touriel			
NATURE: SIGNATURE AND TYPED OD	viuny		4.19.96	407-687-99967
ERIC W. V	PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	Dare	407-687-9995" Dayline Phone (