FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 19 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400009656 (7)

GGR OIL OF FLORIDA, INC.

Mailing Address Principal Place of Business 3200 SHAWNEE #1 3200 SHAWNEE #1 W PALM BEACH FL 33409-5070 W PALM BEACH FL 33409 3. Date Incorporated or Qualified 3a. Date of Last Report 01/31/1994 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0470507 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite Apt # etc 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees 23 Country Country Z(p)This corporation has liability for intangible tax under s. 199.032, $Z_{\rm IP}$ Yes No 29 Florida Statutes 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 GOLDLEY, ROBERT A 102 HALFMOON CIR Street Address (P.O. Box Number is Not Acceptable) . HALFMOON BAY LAKE WORTH FL 33462-5484 83 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, typical or printed name of registered agent and title if applicable (NOTE Registered Agent a gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change Addition DELETE 1.1 TITLE THEF GOLDBERG, ROBERT A 1.2 NAME 15010 FALLERY CREEK 1.3 STREET ADDRESS STREET ADDRESS **HOUSTON TX** CITY-ST-ZIP 1.4 CITY-ST-ZIP Change ☐ Addition DELETE 2 1 TITLE TITLE GILBERT, GERTNER 22 NAME NAME 1400 POST OAK BLVD., STE 500 2.3 STREET ADDRESS STREET ADDRESS **HOUSTON TX** CHY-S1-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE LANCE, ROSMARIN NAME 3.2 NAME 1400 POST OAK BLVD., STE 500 3.3 STREET ADDRESS STREET ADDRESS **HOUSTON TX** CITY - ST - ZIP 3.4. CITY-ST-ZIP Addition DELETE 4.1 TITLE TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST-ZIP 4.4 CITY - ST - ZIP Addition DELETE 51 TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 5 4 CITY-ST-ZIP 011Y - \$1 - 26F DELETE ☐ Change Addition 61 TITLE THLE 62 NAME NAME STHEET ADDRESS **63 STREET ADDRESS**

64 CiTY-ST-ZIP 14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE:

CITY ST-ZIF