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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1998 8:00am

Secretary of State

4730/98 /8131867-3100

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000010978 (2) DOCUMENT

GULF COAST RENTALS AND MANAGEMENT, INC.

Principal Place of Business Mailing Address 116 PINELLAS BAYWAY 116 PINELLAS BAYWAY TIERRA VERDE FL 33715 TIERRA VERDE FL 33715 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/31/1994 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3223621 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Country Zip Country This corporation owes or has paid the current year Intangible □ No 24 29 30 Personal Property Tax due June 30. Yes Yes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SALAMONE, RONALD J 116 PINELLAS BAYWAY Street Address (P.O. Box Number is Not Acceptable) TIERRA VERDE FL 33715 83 84 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, typed or printed name of registence agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE **SALAMONE, RONALD J** NAME 1.2 NAME 116 PINELLAS BAYWAY STREET ADDRESS 1.3 STREET ADDRESS THERRA VERDE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Change TITLE 2.1 11TLE BALAMONÉ, ELIZÁBETY ANY NAME 2.2 NAME 118 PINELLAS BAYWAY STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST- ZIP DELETE Change __ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 1ITLE

6.2 NAME

14. 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 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 for 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 changes of or an attachment with an address.

6.3 STREET ADDRESS

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