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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000023461

1. Corporation Name

GULF CC	JAST GAHEER INSTITUTE,	, INC.										
Principal Place	of Puninger	Mailie	ng Address				-	1	IAI de ili Uulii I		111111	11 1 0) 11 1 11 1880
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3805 A TAMIAMI TRAIL 3805 A TAMIAMI TRAI PORT CHARLOTTE FL 33952 PORT CHARLOTTE FL												
US US		4 , 4					DO NOT WRITE IN THIS SPACE					
								Date Incorporated or Qual	ifed	•		
								03/23/1994				
2. Principal Pl	ace of Business	2a. M	lailing Address				- 1	FEI Number			App	lied For
21	<u></u>	26						65-0545664				Applicable
Suite, Apt.	#, etc.	S	uite, Apt. #, etc.				5.	Certificate of Status Desire	ā 🗙	• .		ditional
22		27						·			e Req	
City & State	e	c	city & State				6.	Election Campaign Finance	ing 🗆			May Be
23		28					+-	Trust Fund Contribution			ded to	rees
Zip	Country	Zi	ıp	Cou	ntry		8.	This corporation owes the	current yea	r Intangible Yes⊟	. г	∃No
24	25	29		30	г		10	Personal Property Tax. Name and Address of N	w Pagieta			
	9. Name and Address of Curre	nt Register	ea Agein		81	Name	10.	Manie and Address of N	sw itogiste	rea rigorn		
HAII	L, MAVIS											
	A TAMIAMI TRAIL				82	Street Addr	ress (P	O. Box Number is Not Acc	ceptable)			
	T CHARLOTTE FL 33952				83							
					0.4	City				EL 85	Zip C	ode
					84	•						
11 Durcuant	to the provisions of Sections 607.05	02 and 607	1508 Florida Sta	atutes the a	hove	named com	oration	n submits this statement for	the numos	e of changi	ng its r	egistered
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the obligi	e of Florida	Such change wa	is authorized	bove-	-named corp	oration on's bo	n submits this statement for pard of directors. I hereby a	the numos	e of changii ppointment	ng its r as reg	egistered istered
office or nagent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig:	e of Florida. jations of, Se	Such change wa ection 607.0505,	is authorized Florida Stati	bove- by thutes.	-named corp he corporation	on's bo	pard of directors, I hereby a	the purpos accept the a	ppointment	ng its r as reg	egistered istered
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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 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, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

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