

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000029877 (5)

1. Corporation Name

GIBRALTOR CAPITAL & FUNDING CORP.

FILED

95 AUG -3 AM 9:23

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

Mailing Address

~~4695 N FEDERAL HIGHWAY~~
~~SUITE 103~~
~~POMPANU BEACH FL 33064~~

~~4695 N FEDERAL HIGHWAY~~
~~SUITE 103~~
~~POMPANU BEACH FL 33064~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

04/18/1994

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 805 W BROWARD BLVD

26 805 W BROWARD BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 FT LAUDERDALE FL

28 FT LAUDERDALE FL

24 Zip

Country

29 Zip

Country

33312

FLORIDA

33312

FLORIDA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MONESI, PATRICK J
3101 PT ROYALE BLVD SUITE 427
FT LAUDERDALE FL 33308

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 registered agent and (if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
MONESI, PATRICK J
3101 PT ROYALE BLVD SUITE 427
FT LAUDERDALE FL 33308

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 in an attachment with an address.

SIGNATURE:

PATRICK J. MONESI 7/25/95
305-728-9181

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6027137 CP

CP2E034 (3/95)