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Sep 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000030258 (5)

1. Corporation Name

G & S FINANCIAL, INC.



Principal Place of Business

1000 W. MCNAB RD.
POMPANO BEACH FL 33069

Mailing Address

1000 W. MCNAB RD.
POMPANO BEACH FL 33069-4719

2. Principal Place of Business

21 3300 University Drive

Suite, Apt. #, etc.

22 Suite 527

City & State

23 Coral Springs FL

Zip

24 33065

Country

25 USA

2a. Mailing Address

26 3300 University Dr

Suite, Apt. #, etc.

27 Suite 527

City & State

28 Coral Springs FL

Zip

29 33065

Country

30 USA

3. Date Incorporated or Qualified

04/19/1994

3a. Date of Last Report

08/14/1996

4. FEI Number

65-0510461

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

9. Name and Address of Current Registered Agent

VICK, GREG

1000 W. MCNAB RD.

POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name

Greg Vick

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

3300 University Drive

83

Suite 527

84 City

Coral Springs

FL

85 Zip Code

33065

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 607.0605, Florida Statutes

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

8/1/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME VICK, GREG

STREET ADDRESS 1000 W. MCNAB RD. 3300 University Dr

CITY-ST-ZIP POMPANO BEACH FL 33308 Coral Springs FL 33065

TITLE ☐ DELETE

NAME VICK, SUSAN

STREET ADDRESS 1000 W. MCNAB RD. 3300 University Dr

CITY-ST-ZIP POMPANO BEACH FL 33308 Coral Springs FL 33065

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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

Greg Vick 8/1/97

954-476

CR2E034 (9/96)