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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P94000037965

## G-L- PROPERTIES CORPORATION-

15500 PINES BOULEVARD CORPORATION

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Principa! Plac	e of Business	ŀ	Mailing Address					(								
1401 UNIVERSITY DRIVE STE. 200 CORAL SPRINGS FL 33071				1401 UNIVERSITY DRIVE STE. 200 CORAL SPRINGS FL 33071-8908												
COMME SERVICE	00 FL 930/1		`	WHAT OLU	1100 16 000	111-2000	,			3. Date in	corporated or (	Dualified	3a. Da	ate of Last	Report	
										05/19	•			01/1996		
2. Principal P	Place of Busin	ėss	21	a. Mailing	Address				***************************************	4. FEI Nu			1		Applied	For
21			26	]						65-0	492057			1	Vot App	licable
Suite, Apt	#, etc			Suite, Ar	ot. #, etc.					6 Certific	ate of Status De	eirad		\$8.75		
22	······		27							<b>U</b> , Columo	ale of Oldios Di	301100	<u> </u>	Fee F	Require	d
City & Star	:e			City & St	late					1	n Campaign Fin		_		May I	
23		Country	28	<u> </u>			Country			·	und Contributio				d to Fee	
		Country	20	7:p Co.			Journal	′		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \( \square\) No					032,	
24 25 9. Name and Address of Current R								—		10. Name and Address of New Registered Agent						
MAI		C/O RUDEN BARN	<del>-</del>				81	N	ame							
			LII				_	_		/5.0 B			<del></del>			
200 E BROWARD BOULEVARD FT LAUDERDALE_FL 33302							82	Street Address (P.O. Box Number is Not Acceptable)								-
	D 100E. 101 W						83	<b></b>				·	· · · · · · · · · · · · · · · · · · ·			
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ľ							84	١	ity				FL	85   Zip	o Code	
11. Pursuant	to the provisi	ons of Sections 607.	0502 and	607.1508,	Florida Stati	utes, th	e abov	e-na	med corpo	ration submi	ts this statemer	t for the p	urpose of	changing	its regi	stered
office or i agent 1 a	registered ag em familiar wit	ent, or both, in the S th, and accept the o	itate of Flo bligations	rida Such i of, Section	change was 607.0505, F	autno: Iorida	rized b Statute	y tne s.	e corporatio	on's board of	directors. I her	вру ассер	t the app	ointment a	ន regisi	erea
SIGNATURE			_													j
CICITATION N	Signatur, typici	or printed name of registere			(NC			en! si	gnatura tequirac	d when reinstating			DATE			
12.	T 86	OFFICERS	AND DIRE		Tractor		13.		·	ADDITIO	INS/CHANGES	TO OFFIC	ERS AND			
TOLE	PD	ITTUAV		L	DELETE	- 1	.1 TITLE		İ					Change	٠ اــا	Addition
NAME	EZRATTI,	IIZDAN VERSITY DRIVE #	iann				2 NAME									
STHEET ADDRESS		SPRINGS FL 3307				- 1	3 STREE		i i							1
TITLE	VS	W THITOO I L DOO!	<u>'</u>	<del>-</del> <del>-</del>	DELETE		A CITY -:	51-21	<u>r</u>	····			··········	Change		Addition
NAME	FANT, AL	ΔN		-			2.2 NAME									
STREET ADORESS		VERSITY DRIVE	1200			- 1	3 STREE	Y ADD	2238							}
CHY-ST-7IP		PRINGS FL 3307					2. 4 CITY-		1							<u>ا</u>
Titte	VT			].	DELETE		3.1 TITLE		<del>-  </del> -					Change		Addition
NAME	COSTELL	O, RICHARO A.				3	3.2 NAME		Ì						X-	/Y
STREET ADDRESS	1401 UN	IVERSITY DRIVE #	200			3	3.3 STREE	T ADD	RESS						P,	<b>∠</b> \
CHY-ST-7/P	CORAL S	PRINGS FL 3307	1			3	3.4. CITY-	S1-Z	IP.						1 /	<u></u>
TITLE	S				DELETE	14	.1 TALE							Change		Addition
NAME	EZRATTI,					- 14	1. 2 NAME		i							[
STREET ADDRESS		IVERSITY DRIVE	200			4	1.3 STREE	T ADO	RESS							i
CITY - ST - ZIP	CORAL G	BABLES FL 33071				4	1.4 CITY-	ST- 71	P		,			<del></del>	·	
TITLE	V			I	DELETE		5.1 TITLE							☐ Change	· 📙	Addition
NAME		K, RICHARD M.					2 NAME		'							
STREET ADORESS	1	IVERSITY DRIVE					3 STREE		1							
COVESTER	CORAL S	PRINGS FL 3307	1		1 851535		S 4 CITY	ST-ZI	P					176		1.2430
THEE				Ţ	DELETE		51 TITLE		ŀ	20	በበበበ።	<b>&gt;17</b>	יחיק.	L Change	; L.	Addition
NAME							5.2 NAME			£ '	00000; 05/08/97	กิเก๋เ	<u>13n</u>	73		
COMMENTARION CO.	1						STREE	Y ADD	MRFCC			~4~		. •		I

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.

6.4 CITY - ST - ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADORESS

CITY-S1-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

\*\*\*165.00

**FILED** 

May 05 1997 8:00am

Secretary of State