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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1, Corporation Name P94000048307 (0)

GINGERBREAD SQUARE GALLERY, INC. Mailing Address Principal Place of Business 1207 DUVAL ST 649 QUINCE CIR BOULDER CO 80304 KEY WEST FL 33040 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/28/1994 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 93-1140229 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 8. Election Campaign Financing Trust Fund Contribution Added to Fees 23 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ No 25 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FLORIDA-LAWDOCK, INC. 222 LAKEVIEW AVE. 82 Street Address (P.O. Box Number is Not Acceptable) 4TH FLOOR 83 WEST PALM BEACH FL 33401 City 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 State change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typer) or printed name of registered agent and life if apply about (NOT) Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 HILE \_\_\_ Change Addition NAME JEFFREY I. BIRN 1.2 NAME STREET ADDRESS 649 QUINCE CIR. 1.3 STREET ADDRESS BOULDER CO 1.4 CITY-ST-ZIP CITY-\$T-ZIP DELETE Change Addition TITLE 2.1 TITLE **IDILIO SALINERO** NAME 2.2 NAME 649 QUINCE CIR. STREET ADDRESS 2.3 STREET ADDRESS **BOULDER CO** CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE DELETE Change Addition 31 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 NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STRELL ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP DELETE Change Addition TITLE 6.1 TO LE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 DITY-ST-ZIP

14. Thereby 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 13 if changed, or on an attachment with an exidense. 4.20066

**FILED** 

May 12 1998 8:00am

Secretary of State