## 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 # P94000053945 (9)

GDA ASSOCIATES, INC.

Principal Place of Business Mailing Address 9321 WEST SAMPLE ROAD **CORAL SPRINGS FL 33065** 

## FILED Feb 02 1998 8:00am Secretary of State



9321 WEST SAMPLE ROAD **CORAL SPRINGS FL 33065** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/19/1994 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 26 65-0507278 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intaggible 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MONTAGNINO, STEPHEN 7003 N.W. 34TH MANOR 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL SPRINGS FL 33065** 83 64 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE Change MONTAGNINO, STEPHEN NAME 1.2 NAME 7003 N.W. 38TH MANOR STREET ADDRESS 1.3 STREET ADDRESS CORAL SPRINGS FL 33065 CITY-ST-ZIP 1.4 CITY - ST- 2IP DELETE Change Addition 2.1 TITLE BLOCK, MICHAEL NAME 22 NAME 275 E. OAKLAND BLVD. STREET ADDRESS 2.3 STREET ADDRESS OAKLAND PARK FL CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS COY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-7IP

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 and on an attact that with an address.