


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

FILED
Apr 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000070936 (7)

1. Corporation Name

UNIVERSAL GAP PLAN, INC.

Principal Place of Business

2090 PALM BEACH LAKES BLVD
#200
WEST PALM BCH FL 33409
US

Mailing Address

2090 PALM BEACH LAKES BLVD
#200
WEST PALM BEACH FL 33409
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/27/1994

4. FEI Number

65-0551761

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DORER, ERIC J
412 NE FOURTH ST
FT LAUDERDALE FL 33301-1197

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
30 NE 3rd Street

83

84 City
Ft. Lauderdale

FL

85 Zip Code
33301-1042

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 title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME WILLIAMS, BARBARA
STREET ADDRESS 1300 N FEDERAL HWY
CITY-ST-ZIP FT LAUDERDALE FL 33304

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Frye, Glen
1.3 STREET ADDRESS 2090 Palm Beach Lakes Blvd., #200
1.4 CITY-ST-ZIP West Palm Beach, FL 33409

TITLE D ☒ DELETE
NAME FRONRATH, GARY
STREET ADDRESS 1300 N FEDERAL HWY
CITY-ST-ZIP FT LAUDERDALE FL 33304

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME Gerstner, Bob
2.3 STREET ADDRESS 2090 Palm Beach Lakes Blvd., #200
2.4 CITY-ST-ZIP West Palm Beach, FL 33409

TITLE D ☐ DELETE
NAME DEAN, PATRICIA B.
STREET ADDRESS 2235 OKEECHOBEE BLVD
CITY-ST-ZIP WEST PALM BEACH FL

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

TITLE D ☐ DELETE
NAME BARKMAN, MICHELE
STREET ADDRESS 2000 PALM BEACH LAKES BLVD. #500
CITY-ST-ZIP FT LAUDERDALE FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 2090 Palm Beach Lakes Blvd., #200
4.4 CITY-ST-ZIP West Palm Beach, FL 33409

TITLE D ☐ DELETE
NAME DEAN, ROGER
STREET ADDRESS 1300 N FEDERAL HWY
CITY-ST-ZIP FT LAUDERDALE FL 33304

5.1 TITLE ☒ Change ☒ Addition
5.2 NAME
5.3 STREET ADDRESS 2235 Okeechobee Blvd.
5.4 CITY-ST-ZIP West Palm Beach, FL 33409

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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, or on an attachment with an address.

SIGNATURE: *Nickola Barkman*

4-14-98 561-478-0588

CR2E034 (10/97)