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

P94000090699 (7) DOCUMENT

TWO GABES, INC. Principal Place of Business Mailing Address 831 E. PROSPECT ROAD 831 E. PROSPECT ROAD OAKLAND PARK FL 33334 OAKLAND PARK FL 33334-3130 3. Date Incorporated or Qualified 3a. Date of Last Report 12/15/1994 01/22/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0545377 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Z_{ip} Country Zip Country This corporation has liability for intangible tax under s. 199.032. Yes 🔲 No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name **GOLDEN, JOYCE** 831 E. PROSPECT ROAD 62 Street Address (P.O. Box Number is Not Acceptable) OAKLAND PARK FL 33334 83 84 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 Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agen) signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6)DELETE Change 1.1 TITLE TITLE GOLDEN, MARK B 1.2 NAME NAME 831 E. PORSPECT ROAD 1.3 STREET ADDRESS STREET ADDRESS OAKLAND PARK FL 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 21 TITLE ☐ Change Addition GOLDEN, JOYCE L NAME 22 NAME 831 E PROSPECT ROAD STREET ADDRESS 2.3 STREET ADDRESS OAKLAND FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Addition Change 31 TITLE THUE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - 204 DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIF Addition ■ DELETE Change THLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CHTY-ST-ZIP 5.4 CHTY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE

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

62 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY - S1 - 74P

FILED

Apr 10 1997 8:00am

Secretary of State