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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

1	ANNUAL REPORT Secretary  1998 DIVISION OF C			ry of State CORPOR		ONS	Secretary of State	
1. Corporation		000033	61 (9)					
GBP CC								
Principal Place of Business Mailing Address						r Ladicoer nie 1960 anie aniel dans onne nater 1956 tille tille 1161 iller 1161		
2665 SOUTH BAYSHORE DRIVE 2665 SOUTH BAYSHORE DRIVE								
SUITE 1002 SUITE 1002 MIAMI FL 33133 MIAMI FL 33133					DO NOT WRITE IN THIS SPACE			
	••						3. Date Incorporated or Qualified	
							01/12/1995	
<b>—</b>	Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For	
21 Suita Ast							65-0567320 Not Applicable	
22							5. Certificate of Status Desired See Required Fee Required	
	City & State						6. Election Campaign Financing \$5.00 May Be	
23 Zin	28			T Co.			Trust Fund Contribution Added to Fees	
Zip 24	Country Zip			30 Cou	PROP		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
29	9, Name and Address of Current Registered Agent			[30]	г-		10. Name and Address of New Registered Agent	
WE	ISER, WARREN P		<del>-</del>		81	Name	· · · · · · · · · · · · · · · · · · ·	
2885 SOUTH BAYSHORE DRIVE SUITE 1002 MIAMI FL 33133					82 Street Add		t Address (P.O. Box Number is Not Acceptable)	
							Address (P.O. Box Number is Not Acceptable)	
•					84	City	as Zip Code	
							FL ~	
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	The state of the s	<del></del>	4101				ire required when reinstating) DATE	
					pistered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D		DELETE	1.1 TO	TLE		Change Addition	
HAME	WEISER, SHERWOOD M	M 1		1.2 N/	1.2 NAME			
STREET ADDRESS				1.3 \$1	1.3 STREET ADDRESS		; <b> </b>	
CITY-ST-ZIP	MIAMI FL 33133			1.4 (1	TY-\$	T-ZIP		
TITLE	•		2.1 Ti	2.1 TITLE		☐ Change ☐ Addition		
NAME	LEFTON, DONALD E			2.2 N/	2.2 NAME			
STREET ADDRESS				2.3 ST	2.3 STREET ADDRESS			
CITY - ST - ZIP			_	2. 4 City+St-ZiP				
TITLE	D				3.1 TITLE		Change Addition	
NAME	SIBLEY, PETER L			3.2 NA				
STREET ADDRESS 3250 MARY ST., 5TH FLOOR				3.3 STREET ADDRESS				
CITY-ST-ZIP	CITY-ST-ZIP MIAMI FL 33133 TITLE D DELETE					ST-ZIP_	Change Addition	
			LT DEFEIF	4,1 T(			Li cuande Ti voquiton	
NAME	WEISER, WARREN P			4.2 N	AME			

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)(f). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 pocietiver or disease engineered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on his altachment with an address

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

NAME STREET ADDRESS 2665 S. BAYSHORE DR., STE. 1002

2665 S. BAYSHORE DR., STE. 1002

**MIAMI FL 33133** 

**MIAMI FL 33133** 

BROOKS, CAROL G

☐ Change

Change

Addition

Addition

**FILED** 

Apr 09 1998 8:00am