

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

FILED

Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000017815 (8)

1. Corporation Name

GULF COMMUNICATION SERVICES, INC.

Principal Place of Business

5100 N. FEDERAL HWY.
SUITE 405
FT. LAUDERDALE FL 33308

Mailing Address

5100 N. FEDERAL HWY.
SUITE 405
FT. LAUDERDALE FL 33308-3842

3. Date Incorporated or Qualified
03/06/1995

3a. Date of Last Report
02/20/1996

2. Principal Place of Business

21 1451 CYPRESS CREEK RD

Suite, Apt. #, etc.

22 SUITE 200

City & State

23 FORT LAUDERDALE, FL

Zip

24 33309

Country

25 BROWARD

2a. Mailing Address

26 1451 CYPRESS CREEK RD

Suite, Apt. #, etc.

27 SUITE 200

City & State

28 FORT LAUDERDALE FL

Zip

29 33309

Country

30 BROWARD

4. FEI Number

LS-0565215

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CHILTON, JOHN W
5100 N. FEDERAL HWY.
SUITE 405
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name GROUP LONG DISTANCE - G DUNNE JR
82 Street Address (P.O. Box Number is Not Acceptable)
1451 CYPRESS CREEK RD SUITE # 200
83
84 City FT LAUDERDALE FL 85 Zip Code 33309

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 signature required when reinstating)

DATE

1/30/97

12. OFFICERS AND DIRECTORS

TITLE PD
NAME CHESS, JOHN G
STREET ADDRESS 5100 N. FEDERAL HWY. SUITE 405
CITY-ST-ZIP FT. LAUDERDALE FL 33308

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DC
1.2 NAME GERARD M DUNNE JR
1.3 STREET ADDRESS 1451 CYPRESS CREEK RD
1.4 CITY-ST-ZIP FT LAUDERDALE FL 33309

☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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 appears in Block 12 or Block 13, changed or on an attachment with an asterisk.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/30/97 954 771 9696

CR2E034 (9/96)