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

Mailing Address
PO BOX 421250

PROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block 13 if

SIGNATURE:

Principal Place of Business

4726 NW 2 AVE



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

(96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000030903 (5)

G & S BUILDING SUPPLY OF BOCA, INC.

BOCA RATON FL MIAMI FL 33242-1250 3. Date Incorporated or Qualified 3a. Date of Last Report 04/17/1995 04/23/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0578760 21 26 Not Applicable Suite, Apl. #, 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 23 28 Trust Fund Contribution Added to Fees Ζφ Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032. 30 Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name POLLACK, ROBERT 5750 NW 32 AVE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33142** 83 84 City Zip Code 85 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 pricted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE ☐ Change Addition THEF 11 TITLE POLLACK, ROBERT NAME 12 NAME 5750 NW 32 AVE STREET ADDRESS 13 STREET ADDRESS MIAMI FL 33142 CITY-ST-7/2 14 City-St-ZiP TITLE PST DELETE 21 TITLE Change Addition POLLACK, SUSAN NAME 2.2 NAME 5750 NW 32 AVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2 4 CITY-ST-ZIP CITY-ST-7P TITLE DELETE 31 TITLE Change Addition Gory, Steve NAME 3.2 NAME 5750 NW 32 AVE STREET ADDRESS 3 3 STREET ADDRESS **MIAMI FL 33142** CITY-ST-7/2 3 4. CITY-ST-ZIP TITLE DELETE 41 TITLE Change Addition DOUGLAS L. ROSEMAN 4.2 NAME NAME 21734 RAINBERRY PK CIRCLE STREET ADDRESS 4 3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 51 TITLE Change Addition NAME 52 NAME STREET AODRESS 5 3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS **63 STREET ADDRESS** 6.4 City-St-ZiP CITY - ST- 7/P 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 acquait 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

with an address

OBEKY TOHACK

Asnoteal or on an atta