## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996
DOCUMENT #
1. Corporation Name

P95000043701 (8)

**GULF COAST ENERGY SERVICES, INC.** 

FILED
May 01 1996 8:00 am
Secretary of State



Principal Place of Business Mailing Address						I HERIOTES IND JOSEP BINIT BRINI BESSE DANN BRINS EIGEB NINN IDDUK BRINS INDI 1801			
·	ENUE SOUTH	222 14TH AVENUE SOL	ПH						
	BURG FL 33701	ST. PETERSBURG FL 3							
						3. Date Incorporated or Qualified 06/06/1995	3a. Date of La	st Report	<del></del>
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	1	Applied	For
1		26 P.O. Pox 355				59-3324411	1	Not App	plicat
Suite, Apt. :	#, <b>e</b> tc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 '	.75 Additi	
City & State		Oity & State						ee Require	
Oily & State	;	28 MALONE	KCXI			<b>6.</b> Election Campaign Financing Trust Fund Contribution	1 4	5.00 May dded to Fe	-
Zip	Country	Zip		untry	, .	8. This corporation has liability for i			
	25	29 12953-0355	30	1-1	RANKLIN	Florida Statutes			
	<ol><li>Name and Address of Curren</li></ol>	t Registered Agent				10. Name and Address of New R	egistered Ageni		
DEAGTI E	LZ BEAPUS			81	Name				
BENTLE'				82	Street Addre	ss (P.O. Box Number is Not Acceptab	le)		
	IT WHITING STREET FL 33602			83					
IAMEA	rL 33002			63					
				84	City		FL 85	Zip Code	;
I Dureuant t	o the provisions of Sections 607,0502	and 607 1509. Florida Statuta	o the she		1	lian a harita this statement for the			
SIGNATURE _ 	Signature typed or printed name of registered agent		E Registered	d Ager	nt signature required i	when reinstating)  ADDITIONS/CHANGES TO OFFI	DATE	CTODE IN 1	10
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	y certify that the information supplied w	rith this filing is voluntarily furnis				the exemption stated in Section 119.0	07(3)(k), Florida St	atutes. I fur	rther

4. Too hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)kly. Florida Statutes: I further certify that the information indicated on this laminal 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 of director offthe on poration or trustee empowered to execute this report as required by Chanter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changeting on an auttarhment with an address.

SIGNATURE:

INTER NAME OF SIGNING OFFICER OR DIRECTOR

(518) 483-**383**5

CR2E034 /12/0