SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000057091

LEISURE ISLE DEVELOPMENT CORPORATION

Principal Place of Business 1859 LINCOLN STREET

Mailing Address

POST OFFICE BOX 861

FILED 97 SEP -5 PM 12: 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA



| HOLLYWOOD FL 33022 | | HOLLYWOOD FL 33022 | | DO NOT WRITE IN THIS SPACE | |
|---|--|---|---------------------------------------|---|---------------------------------|
| | | | | 3. Date incorporated or Qualified | 3a. Date of Last Report |
| | | | | 07/24/1995 | 10/04/1996 |
| | lace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | 65-0596521 | Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | SB.75 Additional Fee Required |
| City & Stat | e e | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes or has pai | d the current year Intangible |
| 24 | 25 | 29 3 | 0 | Personal Property Tax due June | |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent | | | | | |
| HANNON, EDITH | | | 7 | OHN F. CullEN = | re, |
| 1859 LINCOLN STREET HOLLYWOOD FL 33022 | | | 82 Street Ac | dress (P.O. Box Number is Not Acceptab | (e) (1./ 3./ |
| HUL | L1W000 FL 33022 | | 83 / 6. | S CONNA UNIVE | Suite 301 |
| | | | | | |
| | | | 84 City | + ct Ene | FL 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 i | register@i agent, or both, in the State i im familiar with, and accept the oblige | of Florida. Such change was au tions of, Section 607,0505, Flori | thorized by the corpo da Statutes. | ration's board of directors. I hereby accep | t the appointment as registered |
| SIGNATURE JOHCOLE ON JOHNE CIVEN JR 8/1/97 | | | | | |
| | Signature, typed or printed name of registered agen | it and little if applicable. (NOTE: F | Registered Agent signature re | | DATE |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFIC | |
| TITLE | D CONTRACTOR | DELETE | 1.5 TOTALE | from some some some some some | Change Addition |
| NAME | HANNON, EDITH | | 1.2 NAME | | 879550 8701018010 |
| STREET ADDRESS | POST OFFICE BOX 861 N/A HOLLYWOOD FL 33022 | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | 0 | DELETE | 1.4 CITY-ST-ZIP 2.1 TITLE | | Change Addition |
| NAME | Thus COH = | _ | 2.2 NAME | | |
| STREET ADDRESS | Tolo How Co | ^ | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | 7010 Hwy C-30 Port Stroe F | 1 22456 | 2. 4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETÉ | 3.1 TITLE | | Change Acdition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 3.4. CITY - ST - ZIP | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 4, 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | Delete | 4.4 CITY-ST-ZIP | | C Obassa C Addition |
| TITLE | | DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME ATREET ARRESSO | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5 3 STREET ADDRESS | | |
| CITY-ST-ZIP | 1271 | ☐ DELETE | 5.4 City-St-ZiP 6.1 Title | | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY - ST - ZIP | | |

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 if changed, or on an attachment with an address.

2062

Secretary of State Division of Corporations Tallahassee, Florida

RE:

Gulf Aviation Inc.

Gulf International Properties Inc. John F. Culien Construction, Inc.

Four "C" Construction and Property Services Inc.

Leisure Isle Dévelopment Corp

August 28, 1997

Dear Sirs:

I am submitting annual reports to you at this time on behalf of the above referenced corporations. Please forgive the late filing of these reports but we did not receive the reports until here of late as the corporation address changed and we just received the paperwork to file. I believe there is mall we never received at all.

I beg your assistance since I try to file all reports on time but was unable to since I did not get the papers.

Thank you for your assistance with this matter.

Sincerely,

John F. Cullen Jr.

President