

FD-1894

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

FILED

Apr 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF Sandra B. Moore Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P. 95000057641
1. Corporation Name
GOLD CROWN Exchange Inc.

Principal Place of Business Mailing Address

GOLD CROWN EXCHANGE
124 SOUTH FEDERAL HWY
SUITE #2
POMPANO BEACH, FL 33062

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:		2a. Mailing Address:		3. Date Incorporated or Qualified 6/26/95	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 65-074-5282	Applied For Not Applicable
23 Zip	24 Country	28 Zip	29 Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
25		30		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24		25		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

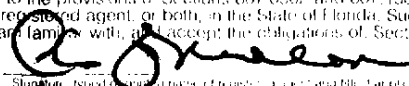
9. Name and Address of Current Registered Agent

Charlie Mahone
2117 Catherine Dr. #3
Delray Beach, FL 33445

10. Name and Address of New Registered Agent

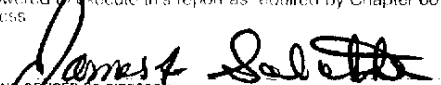
81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	
FL	

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:  (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	James F. Sabatne	1.2 NAME	
STREET ADDRESS	1507 ARGYLE DR. #107	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FL 33312	1.4 CITY-ST-ZIP	
TITLE	Vice President ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	William Brown	2.2 NAME	
STREET ADDRESS	2785 S.E. 1ST CT #3	2.3 STREET ADDRESS	
CITY-ST-ZIP	Pompano Beach, FL 33062	2.4 CITY-ST-ZIP	
TITLE	Sec. TREASURES ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Kenneth YABLON	3.2 NAME	
STREET ADDRESS	2785 S.E. 1ST CT #2	3.3 STREET ADDRESS	
CITY-ST-ZIP	Pompano Beach, FL 33062	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		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	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 hereby certify that the information provided 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.

SIGNATURE: **JAMES SABATNE**  **4/8/98/954-785-6300**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)