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

**PROFIT** CORPORATION ANNUAL REPORT

1997

CITY-ST-ZE

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 02 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000059952 (8)

GULF COAST HYDRAULICS, INC.

Principal Prace of Business Mailing Address 13137 SOUTHWEST 122 AVENUE 13137 SOUTHWEST 122 AVENUE MIAMI FL 33186 MIAMI FL 33186-6232 3. Date Incorporated or Qualified 3a. Date of Last Report 08/03/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0604451 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 81 Name 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 83 R4 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 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 algorature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DPST 1ITLE DELETE 1.1 TITLE Change Addition CRAIG, RICARDO NAME 1.2 NAME 14750SW 158 ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL DITY-ST-ZP 1.4 CITY-ST-ZiP DELETE TITLE 2.1 TITLE Change Addition THOMAS, PIERRE NAME 2.2 NAME 15263 SW 157 TERR. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CHY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Table 3.1 TITLE Change \_\_\_ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZP 3 4. CITY - ST - ZIP DELETE 41 TITLE Change Addition THE NAME **4.2 NAME** STREET ADDRESS **43 STREET ADDRESS** CITY-ST-ZIP 4.4 C/TY+ST-7/P DELETE 51 TITLE Change Addition MILE NAME 52 NAME STREET ADDRESS **53 STREET ADDRESS** 5.4 CiTY+ST-ZIP CHY-ST-ZIP TITLE □ DELETE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS

64 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 is thanged, or on an attachment with an address.