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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name P95000067062 (6)

GULFSTREAM BUILD & DESIGN. INC.

Principal Place of Business Mailing Address 2655 N. OCEAN DR. 1100 PARK CENTRAL BLVD. STE 1700: ROBERTSON & CO. STE 404 DO NOT WRITE IN THIS SPACE SINGER ISLAND FL 33404 POMPANO BEACH FL 33064 3. Date Incorporated or Qualified 08/30/1995 2, Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For Not Applicable 21 59-3332425 OCEAN DE Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes ΠÑο 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Age 10. Name and Address of New Registered Agent 81 Name SOLOMOM, JOSEPH N 2655 N. OCEAN DR. 82 Street Address (P.O. Box Number is Not Acceptable) **STE 404** 83 SINGER ISLAND FL 33404 84 City 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 tills it applicable. (NOTE: Registered Agent signature required when rainstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition PD 1.1 TITLE TITLE SOLOMON, JOSEPH NAME 1.2 NAME 2655 N. OCEAN DR. #404 STREET ADDRESS 1.3 STREET ADDRESS SINGER ISLAND FL 33404 CITY-ST-ZIP 1.4 CiTY - ST - 7(P DELETE 2.1 TITLE Change Addition TITLE SMITH, KARL 2.2 NAME NAME 2655 N. OCEAN DR. #404 STREET ADDRESS 2.3 STREET ADDRESS SINGER ISLAND FL 33404 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-S1-ZIP

14. I 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.

6.4 CITY - \$1 - ZIP

CITY-ST-ZIP

FILED

Apr 10 1998 8:00am

Secretary of State