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Secretary of State

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**PROFIT
 CORPORATION
 ANNUAL REPORT
 1999**



FLORIDA DEPARTMENT OF STATE
Katharine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000085078

1. Corporation Name
GK ACQUISITION CORP.

Principal Place of Business

**6801 LAKE WORTH ROAD
 SUITE 307
 LAKE WORTH FL 33487**

Mailing Address

**6801 LAKE WORTH ROAD
 SUITE 307
 LAKE WORTH FL 33487**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Name and Address of Current Registered Agent

**KANOUSE, KEITH J P.A.
 2424 N. FEDERAL HIGHWAY
 SUITE 363
 BOCA RATON FL 33431**

10. Name and Address of New Registered Agent

81 Name Boswell, Don R.
82 Street Address (P.O. Box Number is Not Acceptable) 2875 South Ocean Blvd., Suite 200
83
84 City Palm Beach, FL 85 Zip Code 33480

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation executes this statement for the purpose of changing its registered office or registered agent by 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

12. **OFFICERS AND DIRECTORS**

11 TITLE D
12 NAME KAPLAN, PAUL
13 STREET ADDRESS 6801 LAKE WORTH ROAD, SUITE 307
14 CITY-ST-ZIP LAKE WORTH FL 33487

11 TITLE D
12 NAME GRABARNICK, LARRY
13 STREET ADDRESS 6801 LAKE WORTH ROAD, SUITE 307
14 CITY-ST-ZIP LAKE WORTH FL 33487

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
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14 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

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11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(b), 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 affidavit with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/99 (561) 434-0443

CR2504 (1/98)