

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

FILED

Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000000415 (5)

1. Corporation Name

GLORIA RECTOR VESSEL DOCUMENTATION, INC.

Principal Place of Business

4317 CULBREATH ROAD
VALRICO FL 33594

Mailing Address

4317 CULBREATH ROAD
VALRICO FL 33594-7304



3. Date Incorporated or Qualified
01/02/1996

3a. Date of Last Report

2. Principal Place of Business

21 4317 Culbreath Road

Suite, Apt. #, etc.

22 Valrico, FL 33594

City & State

23 Valrico, FL

Zip

24 33594

Country

25 Hillsborough

2a. Mailing Address

26 P. O. Box 920

Suite, Apt. #, etc.

27 Valrico, FL 33595-0920

City & State

28 Valrico, FL

Zip

29 33595-0920

Country

30 Hillsborough

4. FEI Number

59-3355953

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes No

9. Name and Address of Current Registered Agent

RECTOR, GLORIA M
4317 CULBREATH ROAD
VALRICO FL 33594

10. Name and Address of New Registered Agent

81 Name
Same

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 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 607.0502, Florida Statutes.

SIGNATURE Gloria M. Rector

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/10/97

12. OFFICERS AND DIRECTORS

TITLE President/Secretary/Treasurer DELETE
NAME Gloria M. Rector
STREET ADDRESS 4317 Culbreath Road
CITY-ST-ZIP Valrico, FL 33594

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/Sec/Treasurer
1.2 NAME Gloria M. Rector
1.3 STREET ADDRESS 4317 Culbreath Road
1.4 CITY-ST-ZIP Valrico, FL 33594

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE: Gloria M. Rector, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/97

Date

813 689-5140

Daytime Phone #

CR2E034 (9/96)