FILE NOWN FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham CORPORATION Secretary of State ANNUAL REPORT DIVISION OF CORPORATIONS 1996 DOCUMENT # P96000001892 Corporation Name G.A.B. FLORIDA ONE, INC., a Florida corporation Mailing Address Principal Place of Business Same 1236 Airport Road Naples, FL 33942 Date of Last Report Date Incorporated or Qualified Jan. 8, 1996 Applied For 2a. Mailing Address Principal Place of Business Not Applicable 65-0637084 26 1236 Airport Road Same \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Fee Required Suite, Apt. #, etc. 27 \$5.00 May Be 6. Louis Contract to an City & State City & State Added to Fees and the second section 28 23 Naples, FL This corporation has liability for intangible tax under s 199.032, Country Country U.S. Zφ Yes 🚺 No Ζφ Florida Statutes 29 30 25 Name and Address of New Registered Agent 24 33942 Name and Address of Current Registered Agent Name Same Jane Yeager Cheffy, Attorney at Law Street Address (P.O. Box Number is Not Acceptable, 2375 Tamiami Trail N. #207 Naples, FL 33940 83 Zıp Çode 85 84 City 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. (NOTE: Registered Agent signature required when reinstating) SIGNATURE Signature, typed or printed name of registered agent and tille if applicable 13. OFFICERS AND DIRECTORS Addition Change 12 1. 1 TITLE DELETE TITLE 1.2 NAME Derek Thomas NAME 1.3 STREET ADDRESS 1236 Airport Road STREET ADDRESS 1.4 CITY-ST-ZIP Naples, FL 33942 Change Addition CITY - ST - ZIP DELETE 2 1 TITLE S T & V.P. TITLE 2.2 NAME Glenn Jones NAME 2.3 STREET ADDRESS 255 Queens Ave., Suite 2000 STREET ADDRESS N6A 5R8 24 CITY - ST- ZIP Ondon, Ontario, CANADA ☐ Change ☐ Addition CITY-ST-ZIP DELETE 3. 1 TITLE TITLE 3.2 NAME NAME 600001808116 3.3. STREET ADDRESS <u>-05/06/96--01015--006</u> STREET ADDRESS 3 4 CITY-ST-ZIP ☐ Change ☐ Addition CITY - ST-ZIP ***200.00 4.1 TITLE DELETE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP ■ Addition Change CITY-ST-ZIP 5 1 TITLE DELETE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP Addition Change CITY-ST-ZIP DELETE 6. 1 TITLE TITLE 6.2 NAME

SIGNATURE: _

STREET ADDRESS.

OR DIRECTO

6.3 STREET ADDRESS

President

4/29/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 certify 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 or an attachment with an address. (941) 263-1130

CR2E034 (12/95)