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 P96000015484 (4)

GULFCOAST ENGINEERING SERVICES, INC.

FILED May 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			1 (DOLINO) HED ANEID WENT GOIN ONNI CONTRACTOR		
577 DUNCAN AVENUE SOUTH CLEARWATER FL 34616	577 DUNCAN AVENUE SOUTH CLEARWATER FL 34816		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified		
				02/19/1996	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26			59-3370542	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Ζφ	Country		8. This corporation owes or has paid the o	current year Intangible
24 25	29	30		Personal Property Tax due June 30.	∐ Yes ∐ No
9. Name and Address of Current	Registered Agent		Maria	10. Name and Address of New Registers	d Agent
VERNON, J. MARCUS ESQ.			Name		
577 SO UTH DUNCAN AVENUE CLEARWATER FL 34616		ε	Street Ad	dress (P.O. Box Number is Not Acceptable)	
			13		
		8	14 City	F	L 85 Zip Code
11. Pursuant to the provisions of Socious 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 halos of legistered agent 12. OF HOLERS AND	i		Agent signature req	ADDITIONS/CHANGES TO OFFICERS A	
12. OFFICERS AND	DELFTE	13.		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME VERNON, J. MARCUS		1.2 NAM	1		
STREET ADDRESS 877 S. DUNCAN AVENUE		1.3 STRF			
CITY-ST-ZIP CLEARWATER FL 34616			-ST-ZIP		
TITLE	DELETE	2.1 7(1)			Change Addition
NAME		2.2 NAM	E		
STREET ADDRESS		2.3 STRE	EFT ADDRESS		
CITY-ST-ZIP _		2. 4 CIT	Y-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLI			Change Addition
NAME		3.2 NAM	E		
STREET ADDRESS		3.3 STR	ELI ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		/-\$T-7IP		
TITLE	DELETE	4.1 TITLI			Change Addition
NAME		4. 2 NAN			
STREET ADDRESS		4.3 STRE	ET ADDRESS		
CITY-ST-ZIP	Doctor		-ST-ZIP		Channa L Addition
TITLE	☐ DELETE	5.1 TITLE	1		Change Addition
NAME OTSEST ADDRESS		5.2 NAM	ŧ		
STREET ADDRESS		1	ET ADDRESS		
CITY-ST-ZIP	☐ DELETE	5.4 CHY 6.1 THL			Change Addition
NAME	L.J DELETE	6.2 NAM			Change rounded
STREET ADDRESS			ET ADDRESS		
CITY-ST-ZIP			- ST - ZIP		
14. I hereby certify that the information supplied with	this filing does not qualify			n Section 119.07(3)(i), Florida Statutes. I further	certify that the information

on supplied with this triing does not quarry for the exemption.

Appliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that i am all no of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in or yi an attachment with an address. officer or director of the corporar Block 12 or Block 13 if charges