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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

P96000024391 (0)

GILBERT LEE HENRICKS, INC.

FILED Apr 30 1998 8:00am Secretary of State

Principal Place of Business Malling Address						N DINNI HINDO DINNE DENDI HIBE INDI
14325 DESILU DRIVE		14325 DESILU DRIVE				
ORLANDO FL 32832		ORLANDO FL 32832		DO NOT WRITE IN TH	UC CDACE	
					3. Date Incorporated or Qualified	IIS SPACE
					03/19/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3189517	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Commode of States Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
Zip	Country Zip Cou		Countr		Trust Fund Contribution	Added to Fees
24	25	29	30		 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
AMERILAWYER CHARTERED				Name		
343 ALMERIA AVENUE CORAL GABLES FL 33134			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
					Total (1.6. Dox Hamber is Net Acceptable)	
			83	1		
		·	84	City		85 Zip Code
				'		·L
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abooffice or registered agent, or both, in the State of Florida. Such change was authorized in the State of Florida.					poration submits this statement for the purpos tion's board of directors. I hereby accept the t	e of changing its registered spoointment as registered
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, typod or printed name of registered as	nery and tille it availe able (NOTE	F: Requetered Ad	on cianatura tonui	red when reinstating) DAT	
12.		ID DIRECTORS	13.	on signature rough	ADDITIONS/CHANGES TO OFFICERS A	-
TITLE	PSTD	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	HENRICKS, GILBERT LEE		12 NAME			
STREET ADDRESS 14325 DESILU DRIVE			1.3 STREE	1 ADDRESS		
CITY-ST-ZIP			1.4 CITY-	ST-ZIP		
TITLE		DELETE	21 TITLE			☐ Change ☐ Addition
NAME			2.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE		DÉLETE	2. 4 Cfty - 3.1 Title	ST-ZIP		Change Addition
NAME			3.1 TILE			C Change C Addition
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	1		
TITLE		DELETE	4.1 TITLE	31 ZH		Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST - ZIP		
TITLE		☐ DELETE	5.1 TITUE			Change Addition
NAME			5.2 NAME	l		
STREET ADDRESS			5.3 STREE	ADDRESS		
CITY-\$T-ZIP	<u> </u>	1 bereie	5.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			3	ADDRESS		
CITY-ST-ZIP			6.4 CITY -	ST-ZIP		

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.