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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000048076 (9)

**GURSPAN ENTERPRISES, INC.** 

**FILED** Apr 02 1998 8:00am Secretary of State



Pr		<u>_</u>					
Teddy Gurspan 2426 Northwest 49th Terrace Coconut Creek, FL 33063			Teddy Gurspan 2426 Northwest 49th Terrace Coconut Creek, FL 33063				
US			US				DO NOT WRITE IN THIS SPACE
							3. Date incorporated or Qualified
2. Principal P	ace of Business	2a.	Mailing Address				06/03/1996 4. FEI Number Applied For
21							65-0675982 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			•	S8 75 Additional
22							5. Certificate of Status Desired Fee Required
City & State			City & State				6. Election Campaign Financing \$5.00 May Be
23			8				Trust Fund Contribution Added to Fees
Zip	Country		, '		untry		8. This corporation owes or has paid the current year Intangible
24	25 p. Name and Address of Curren	29	ered Agent	30]	)		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
		r volie	reted Agent		81	Name	10. Hame and Address of New Neglected Agent
	REENE, WILLIAM						
4698 N.W. 103RD AVE. SUNRISE FL 33351			<b>82</b> Stre		Street A	Address (P.O. Box Number is Not Acceptable)	
J	OHNOC FL 33331				83		
					84	City	FL B5 Zip Code
44 Purcuant t	o the provisions of Sections 607 050	2 and 60	07 1508 Florida Statul	es the s	have	-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 Statules.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
12.	OFFICERS ANI			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE		1.1 1	1.1 TITLE		☐ Change ☐ Addition	
NAME	GURSPAN, TED			1.21	IAME	1	
STREET ADDRESS	4698 N.W. 103RD AVE.			1.3 \$	STREET	ADDRESS	
CITY-ST-ZIP	SUNRISE FL 33351		· · · · · · · · · · · · · · · · · · ·		OTY-S	T-ZIP	
TITLE			DELETE	2.1 TITLE		]	Change L Addition
NAME					AME	l	
STREET ADDRESS					2.3 STREET ADDRESS 2.4 City-St-Zip		
CITY-ST-ZIP			DETE	DELETE 3.1 TI		ST-ZIP	Change Addition
TITLE			€ beere		IAME		
NAME Street address						ADDRESS	
CITY-ST-ZIP					CITY-S		
TITLE	An .		D. C. C. C.		4.1 TITLE		Change Addition
NAME					NAME		
STREET ADDRESS				4.3	STREET	ADDRESS	
CITY-ST-ZIP				4.4 (	CITY-S	t-ZIP	
TITLE			☐ DELETE	5.1	ITLE		Change Addition
NAME				5.21	NAME		
STREET ADDRESS				5.3	STREET	ADDRESS	
CITY+ST-ZIP				5.41	HY-S	1 - ZIP	
TITLE			☐ DELETE		TITLE		☐ Change ☐ Addition
NAME					AME		
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP	and the that the information and	ally their a	distribution and assets	6.4 f	CITY-S	T-ZIP	od in Contine 110 07/3V/i) Florida Statutas I further portific that the information
14. I nereby (	seriny trial the information supplied w	ரு inis i	iligg does not qualify t	OLUIG 6)	emp	non state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information

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 vorso trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the point with an address. indicated on this annual report or officer or director of the corporation Block 12 or Block 13 if changed,