

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

FILED
Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000052135 (6)**

1. Corporation Name
GATOR GANG, INC.

Principal Place of Business
**3160 SW 27TH AVENUE
APT 4
COCONUT GROVE FL 33133**

Mailing Address
**3160 SW 27TH AVENUE
APT 4
COCONUT GROVE FL 33133**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3586 A MAIN HWY Suite, Apt. #, etc. 22 City & State 23 MIA, FLA Zip 24 33133 Country 25 DADE		2a. Mailing Address 26 3586 A MAIN HWY Suite, Apt. #, etc. 27 City & State 28 MIA, FLA Zip 29 33133 Country 30 DADE		3. Date Incorporated or Qualified 06/17/1996	4. FEI Number 65-0676591 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent

**MARTONE, DORIS
3160 SW 27TH AVENUE
APT 4
COCONUT GROVE FL 33133**

10. Name and Address of New Registered Agent

81 Name	CARSTENS, DORIS
82 Street Address (P.O. Box Number is Not Acceptable)	3586 A MAIN HWY
83	
84 City	MIAHI
85 Zip Code	FL 33133

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

Doris Carstens

(DORIS CARSTENS)

03-03-98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	MARTONE, DORIS	1.2 NAME	CARSTENS, DORIS
STREET ADDRESS	3160 SW 27TH AVENUE	1.3 STREET ADDRESS	3586 A MAIN HWY.
CITY-ST-ZIP	COCONUT GROVE FL 33133	1.4 CITY-ST-ZIP	MIA, FL 33133
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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

SIGNATURE:

Doris Carstens

DORIS CARSTENS

03-03-98

(305) 445-3836

CR2E034 (1097)