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 P96000062709 (6)

GALE GREETINGS, INC.

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 19511961 119 49119 BILLY BBILL BBILL BBILL BALLS		58145 1511 1651	
2640 NW 83RD TERRACE 2640 NW 83RD TERRACE									
CORAL SPRINGS FL 33065			CORAL SPRINGS FL 33065				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
							07/26/1996		
2. Principal F	Place of Business	2a. Mailing	Address				4. FEI Number		pplied For
21		26					65-0687054		ot Applicable
Suite, Apt.	. #, 0 1c.	Suite, <i>I</i>	Apt #, etc.				5. Certificate of Status Desired		Additional equired
City & Stat	te	City &	State				6. Election Campaign Financing	\$5.00	May Be
23		28	<u>, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	,			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip		Coun	itry		8. This corporation owes or has paid the curre		
24	[25]	29		30			Personal Property Tax due June 30.		No
	9. Name and Address of Currer	it Hegistered A	gent		B1	Name	10. Name and Address of New Registered A	Beur	
	ACWHIRTER, JOHN W JR.			L					
	100 NORTH TAMPA STREET			[4	B2	Street Addr	ess (P.O. Box Number is Not Acceptable)		
1	MPA FL 33602			<u> </u>	B3				
				L				1721	
·				1		City	FL		Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508	, Florida Statu	tes, the ab	ove-	named corp	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoint	changing	its registered
office or agent 1 a	registered agent, or both in the State am familiar with, and accept the oblig	eof Florida. Such ations of, Sectio	i change was n 607.0505, Fl	authorized orida Statu	by i ites.	the corporat	ion's board or directors. I hereby accept the appo	ınıment as	s registered
SIGNATURE									
	Signature, typod or printed name of registered age		ile (NO		Agen	I signature requir	red when reinstating) DATE	DIDECTO	DO IN 10
12.		D DIRECTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND	Change	HS IN 12 Addition
TITLE	D D		□ DELETE	1.1 THU				CHENTE	L. HOURIGH
NAME	CALLAHAN, KAREN			12 NA		IDDDIGG.			
STREET ADDRESS	2640 NW 83RD TERRACE CORAL SPRINGS FL 33065					ADDRESS 200			
CITY-ST-ZIP	CURAL SPRINGS PL 33003	7	DELETE	1.4 CIT		· Z(P		Change	Addition
NAME				2.2 NA		İ	•		
STREET ADDRESS						ADDRESS			
				2.4 CI		1			
CITY-ST-ZIP TITLE			DELETE	3.1 TITI		LH .	, , , , , , , , , , , , , , , , , , , ,	Change	Addition
NAME				3.2 NA				,	
STREET ADDRESS						ADDRESS			
CATY-ST-ZIP				34 CI					
TITLE			DELETÉ	4.1 111				Change	Addition
NAME				4. 2 NA	ME	1			
STREET ADDRESS				4.3 STF	REET A	ADDRESS			
CITY-ST-ZIP				4.4 CIT		l			
TITLE			DELETE	5.1 TiT		- 1		Change	Addition
NAME				5.2 NA	ME				
STREET ADDRESS				5.3 STF	REET A	ADDRESS			
CITY-ST-ZIP				5.4 CIT	Y - ST	- 71P			
TITLE		·	DELETE	6.1 111	LE			Change	☐ Addition
NAME				6.2 NAI	ME				
STREET ADDRESS				6.3 STF	REET A	ADDRESS			
1									
CITY-ST-ZIP				6.4 CIT	Y-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 recoiver 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.