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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000064050 (3)

GULF AMERICAN TRADING, INC.

Principal Place of Business Mailing Address

4809 KENSINGTON AVENUE

4609 KENSINGTON AVENUE

FILED Feb 27 1998 8:00am Secretary of State



TAMPA FL 33629-8341 TAMPA FL 33629-8341 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/29/1996 2a. Mailing Address Applied For Henderson Blvd 3825 Henderson Blvd 59-3392320 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required City & State 6. Election Campaign Financing \$5.00 May Be TAMPA TAMPA Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 9 25 U.S.A. 29 3363 9. Name and Address of Current Registered Agent ÜS A Personal Property Tax due June 30. X Yes □ No 10. Name and Address of New Registered Agent CRESTA, ANDREA K 4609 KENSINGTON AVENUE **B2** Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33629-8341 83 64 City Zip Code 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. Fhereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typind or printed name of registered agent and tile if applicable OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE NAME CRESTA, ANDREA K 12 NAME 4609 KENSINGTON AVENUE STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 33629-8341 CITY-ST-ZIP 1.4 City-St-ZiP DELETE X Addition Change TITLE 21 TITLE NAME CRESTA, TONY J 22 NAME **4609 KENSINGTON AVENUE** STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL 33629-8341 CITY-ST-ZIP 2 4 CITY-ST-ZIP □ DELETE ☐ Change Addition TITLE 3 1 TITLE CRESTA, ANDREA K NAME 3.2 NAME 4609 KENSINGTON AVE. STREET ADDRESS 3.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition DELETE Change TITLE 5.1 TITLE 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE ☐ Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 attachinent with an address.

ANDREA K CRESTA

SIGNATURE