## 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

## **FILED** Jan 23 1998 8:00am Secretary of State

DOCUMENT # P96000065721 (8)  GSC INDUSTRIES, INC.									
Principal Place of Business Mailing Address						{			
3645 N.W. 671 MIAMI FL 3314	TH STREET	Ü	3645 N.W. 67TH STREET		DO NOT WRITE IN THIS	SPACE			
						3. Date Incorporated or Qualified 08/06/1996	or No.		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	17	Applied For	
21	26					65-0689097		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75	Additional	
22 27						5. Certificate of Status Desired	Fee f	Required	
City & State	<u> </u>	City & State				6. Election Campaign Financing Trust Fund Contribution  S 5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	Cour	ntry		8. This corporation owes or has paid the cur Personal Property Tax due June 30.	_ ′	ntangible	
24	9. Name and Address of Curren		130]			10. Name and Address of New Registered			
COI	RNWALL, ROBERT M			81	Name				
3845 N.W. 87TH STREET MIAMI FL 33147			-	82 Street Addr		ess (P.O. Box Number is Not Acceptable)			
				83					
							Tagl 7:	0-4-	
				84 City		FL	.     `	o Code	
11. Pursuant to office or re	o the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligations.	2 and 607.1508, Florida Statut of Florida Such change was a strong of Section 607.0505. Flo	es, the ab authorized orida Statu	ove-i Lby t	named corp the corporat	poration submits this statement for the purpose o ion's board of directors. I hereby accept the app	f changing jointment a	its registered as registered	
SIGNATURE									
12.	Signature, typed or printed name of registered agor OFFICERS AND		13.	Agent	signature requir	ed when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DRS IN 12	
TITLE	D	DELETE					Change		
NAME	GROSSMAN, ROBERT D		1.2 NAM	ME					
STREET ADDRESS	<b>3645 N.W. 67TH STREET</b> 13S		1.3 STR	REET A	DDRESS				
CITY-ST-ZIP	MIAMI FL 33147			y-S1-	ZIP		_		
TITLE	D	☐ DELETE	2 1 TITE	LE			☐ Change	Addition C	
NAME	CORNWALL, ROBERT M	22 N		ME					
STREET ADDRESS		111 51 00447		2 3 STREET ADDRESS					
CITY - ST - ZIP	MIAMI FL 3314/			2 4 CITY-ST-ZIP 3.1 TITLE		<u>.</u>	Change	Addition	
TITLE	SCHIDEL, THOMAS R							☐ MUUITION	
NAME Street address	3645 N.W. 67TH STREET	3.2 N			DDRESS				
CITY-ST-ZIP	MIAMI FL 33147			1661 AL 14-81-				İ	
TITLE	D	DELETE 4.1.T			- 211		☐ Change	Addition	
NAME	GOLDRING, NANCY S		4. 2 NA	ME					
STREET ADDRESS	3645 N.W. 87TH STREET				DDRESS				
CITY-ST-ZIP	MIAMI FL 33147		4.4 CIT	Y - ST -	ZIP				
TITLE	D	☐ DELETE	5.1 TITL	LE			Change	☐ Addition	
NAME	GROSSMAN, ROBERT D JR		5.2 NAN	ME					
STREET ADDRESS	3645 N.W. 67TH STREET		5.3 STR	REET AL	DDRESS				
CITY-ST-ZIP	MIAMI FL 33147	The eve	5.4 CIT		ZIP		<u> </u>	<del> </del>	
TITLE	D LEMET IDMINO OD	DELETE	6.1 TITL				☐ Change	☐ Addition	
NAME DEDECT ADDRESS	LEVITT, IRVING DR 3645 N.W. 67TH STREET		6.2 NAM		DODECC				
STREET ADDRESS	MIAMI FL 33147	EL 00447		6.3 STREET ADDRESS 6.4 CITY - ST - ZIP				1	
CITY-ST-ZIP   MIAMI FL 33147						Section 119.07(3)(i), Florida Statules. I further ce	rtify that th	e information	

cute this report as required by Chapter 607, Florida Statutes; and that my name appears in