

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 17, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000097171**

1. Entity Name

GULF STAR ENTERPRISES, INC.



Principal Place of Business

4430 HIGHWAY 90  
NETTLEWOOD PLAZA  
PACE, FL 32571

Mailing Address

4430 HIGHWAY 90  
NETTLEWOOD PLAZA  
PACE, FL 32571

**DO NOT WRITE IN THIS SPACE**



03062008 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3412305

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BANKES, ALLAN D  
1952 BAY POINT BLVD  
MILTON, FL 32583

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

000000859605  
04/02/08-80028-025 150.00

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME BANKES, ALLAN D  
STREET ADDRESS 4430 HIGHWAY 90, NETTLEWOOD PLAZA  
CITY- ST- ZIP PACE, FL 32571

TITLE  
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CITY- ST- ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/12/08  
Daytime Phone #