

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 08, 2003 8:00 am**  
**Secretary of State**

01-08-2003 90127 043 \*\*\*158.75

DOCUMENT # **P96000101712**



1. Entity Name  
**GBF ENGINEERING, INC.**

Principal Place of Business  
**3305 NW 55TH ST. BLDG. 14  
FT. LAUDERDALE FL 33309**

Mailing Address  
**3305 NW 55TH ST. BLDG. 14  
FT. LAUDERDALE FL 33309**



2. Principal Place of Business  
**3305 N.W. 55th St. Bldg 14**

3. Mailing Address  
**3305 N.W. 55th St. Bldg. 14**

CHECK HERE IF MAKING CHANGES

City & State  
**Fort Lauderdale, FL**

City & State  
**Fort Lauderdale, FL**

4. FEI Number **65-0715034**

Applied For  
 Not Applicable

Zip **33309** Country **Broward**

Zip **33309** Country **Broward**

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**DILMAGHANI, GLADYS SOTO**  
**9248 N.W. 49TH PLACE**  
**SUNRISE FL 33351**  
*Dilmaghani, Gladys Soto*  
*12737 N.W. 18th Place*  
*Coral Springs, Florida*  
*33071*  
*Address change*

**Dilmaghani, Gladys Soto**  
**12737 N.W. 18th place**  
**Coral Springs, FL 33071**

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 *Gladys Soto Dilmaghani*  
*Gladys Soto Dilmaghani - President*

DATE **1-6-2003**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE **P**  Delete  
NAME **DILMAGHANI-SOTO, GLADYS**  
STREET ADDRESS **9248 N.W. 49TH PLACE**  
CITY-ST-ZIP **SUNRISE FL 33351**  
*Change of Address*

TITLE  Change  Addition  
NAME **Dilmaghani-Soto Gladys**  
STREET ADDRESS **12737 N.W. 18th place**  
CITY-ST-ZIP **Coral Springs, Florida 33071**

TITLE **V**  Delete  
NAME **HOSSEINI, HAMID**  
STREET ADDRESS **18260 N. BAY RD #310**  
CITY-ST-ZIP **N. MIAMI FL 33160**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
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TITLE  Delete  
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TITLE  Change  Addition  
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CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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: *Gladys Soto Dilmaghani*  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **1-6-2003** (954) 735-6823  
Daytime Phone #

CR2E034 (10/02)