

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

FILED
May 07 1998 8:00am
Secretary of State

| | | |
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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # P97000022241 (8)
1. Corporation Name
GULF MINT, INC.

Principal Place of Business
2421 NW 41ST STREET
SUITE A-2
GAINESVILLE FL 32606

Mailing Address
2421 NW 41ST STREET
SUITE A-2
GAINESVILLE FL 32606

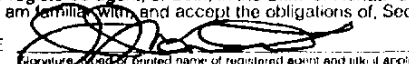


DO NOT WRITE IN THIS SPACE

| | | | | | |
|--------------------------------|-----|---------------------|----------------|---|------------|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 03/11/1997 | |
| 21 | | 26 | PO BOX 12822 | 4. FEI Number | 59-3432404 |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | Applied For Not Applicable | |
| 22 | | 27 | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| City & State | | City & State | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 23 | | 28 | GAINESVILLE FL | 7. This corporation has has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| 24 | Zip | 29 | 32604 | 30 | USA |
| Country | | Country | | | |

| | | | |
|--|--|--|--|
| 9. Name and Address of Current Registered Agent | | 10. Name and Address of New Registered Agent | |
| HAYTER, JOHN F 704 NORTHEAST 1ST STREET GAINESVILLE FL 32601 | | 81 Name JOHN J. MARTIN | |
| | | 82 Street Address (P.O. Box Number is Not Acceptable) 2421 NW 41ST ST STE A-2 | |
| | | 83 | |
| | | 84 City GAINESVILLE FL 85 Zip Code 32606 | |

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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  JJ MARTIN, VP DATE 4/23/98

| | | | |
|----------------------------|----------------------------|---|--|
| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | PD | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MAYER, JERRY | 1.2 NAME | |
| STREET ADDRESS | 2421 NW 41 STREET, STE A-2 | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | GAINESVILLE FL 32606 | 1.4 CITY-ST-ZIP | |
| TITLE | VD | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | WEAVER, LEROY | 2.2 NAME | |
| STREET ADDRESS | 2421 NW 41 STREET, STE A-2 | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | GAINESVILLE FL 32606 | 2.4 CITY-ST-ZIP | |
| TITLE | VD | 3.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MARTIN, JOHN J | 3.2 NAME | PD |
| STREET ADDRESS | 2421 NW 41 STREET, STE A-2 | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | GAINESVILLE FL 32606 | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 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 attachment with an address.

SIGNATURE:  DATE 4/29/98 352-371-3106

CR2E034 (10/97)