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FILED
Mar 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000038360 (8)

1. Corporation Name
GULF DIRECT, INC.



Principal Place of Business
3348 DRUSILLA LN. #58
BATON ROUGE LA 70809

Mailing Address
3348 DRUSILLA LN. #58
BATON ROUGE LA 70809

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/29/1997

4. FEI Number
59-3458230

Applied For
Not Applicable

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

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21. 5010 Tennessee Capital Blvd
Suite, Apt. #, etc.

2a. Mailing Address

26. 5010 Tennessee Capital Blvd
Suite, Apt. #, etc.

City & State

23. Tallahassee Florida

Zip Country
24. 32303 25. USA

City & State

28. Tallahassee Florida

Zip Country
29. 32303 30. USA

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name Brian Ballard
82 Street Address (P.O. Box Number is Not Acceptable)
5010 Tennessee Capital Blvd.
83
84 City Tallahassee FL 85 Zip Code 32303

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 *Brian Ballard / Pres.*

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

(NOTE: Registered Agent signature required when reinstating)

3/20/98
DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BALLARD, BRIAN
STREET ADDRESS 3348 DRUSILLA LN. #58
CITY-ST-ZIP BATON ROUGE LA 70809

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 5010 Tennessee Capital Blvd.
1.4 CITY-ST-ZIP Tallahassee Florida 32303

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
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 attachment with an address.

SIGNATURE *Brian Ballard / Pres.*

3/20/98

CR2E034 (10/97)