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

DOCUMENT # P9700042005 (3)

1.	, Corporation GABRIE	n Name L REALT	Y, INC.		2000	, (0)									
Principal Place of Business Mailing Address											-		JAK OJA OL		
5327-A W EHRLICH RD 5327-A W EHRLICH RD															
TAMPA FL 33625				TAMPA FL 33625					DO 1107 WINTER A 17 W 20 107						
											A Data Incorpor	DO NOT WRI		SPACE	
											3. Date Incorpor		ı		
2.	Principal P	lace of Busi	ness	28	, Mailing Ad	idress					05/08/1993 4. FEI Number			TA	oplied For
21	,				26						59-3	44722	9	} 	ot Applicable
1	Suite, Apt. #, etc.			Suite, Apt. #, etc.						5. Certificate of S	Status Danisad		\$8.75	Additional	
22	2			27						5. Certificate of a	Status Desired			equired	
23	City & State			City & State						6. Election Camp Trust Fund Co		П		May Be to Fees	
23	Zip	ip Country			Zip			Country			B. This corporation				
24	,		25	29 30			30					erty Tax due Jui			No
9. Name and Address of Current Registered Agent								Ī			10. Name and Ad			Agent	
KURIAL, Y. S.								81	Name)					
	5327-A W EHRLICH RD							82	Street	Addre	ss (P.O. Box Numbi	er is Not Accept	able)		
TAMPA FL 33625															
								83							
								84	City				FI	85 Zip	Code
1	office or ragent. I a	to the provis egistered ag m familiar w	ions of Sections 607.0 gent, or both, in the Sta ith, and accept the obt	607.1508, Fli ida. Such ch of, Section 6	orida Statut lange was 07.0505, Fl	bove d by tutes	-named the cor	d corpo rporatio	oration submits this son's board of directo	statement for the ors. I hereby acc	purpose ept the ap	of changing it pointment as	ls registered registered		
S	GNATURE	Signature types	For profed name of registered	isieni and Me	e if applicable	(NOT	E floaistore	d Agei	ni sianalur	e require	d when reinstaling}		DATE		
12			OF ICERS A	· · · · · · · · · · · · ·			13.					IANGES TO OFF	ICERS AN	ID DIRECTOR	RS IN 12
TIT	TLE .	D		DELETE			1.1 (1.1 TITLE						☐ Change	Addition
N/	IME	Kurial,					1.2 N	AME							
ST	reet address		w ehrlich RD				1.3 S	TREET	adoress						
$\overline{}$	TY-ST-ZIP	TAMPA	FL 33625		 -			TY-\$1	- ZIP	ļ					
	'LE					DELETE	2.1 To							Change	Addition
	ME						2.2 N		4000540						
1	REET ADDRESS								ADDRESS	1					
TIT	IY+ST-ZIP					DELETE	3.171	ITY-S	1-ZIP	+				Change	Addition
	ME				_	-	3.2 N			1					
1	REET ADDRESS								ADDRESS	1					
	IY-ST-ZIP							ITY-S							
TIT	LE					DELETE	4.1 TI	TLE		1				Change	Addition
NA.	ME						4.21	IAME							
ST	REET ADDRESS						438	TREET	ADDRESS						
	ry-st-zip						_	ITY-ST	- ZIP	1				-	7-7
. 111		٠,				DELETE	5.1 TI							∐ Change	Addition
	ME						5.2 N								
ı	REET ADDRESS						1		ADDRESS						
	Y-ST-ZIP					DELETE	_	ITY-SI	- ZIP	+		-		Change	Addition
TITLE DELETE 611												Change	□ ¥00±ti0U		
NA.	Mt						6.2 N	AME		1					

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 a statement with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

FILED

Mar 31 1998 8:00am

Secretary of State