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 # P97000060803 (8)

GULF STAR COMMUNICATIONS, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address		A MAGILIDAL UND SALAS MAGILI ADVIN ARTISE ERISI M	#110 #1101 #B1#1 18011 ##108 B110 F##1
6080 ESTERO BLVD 6080 ESTERO BLVD FT MYERS BEACH FL 33931 FT MYERS BEACH FL 3393			31	DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualified	
A 53-1-15	W			07/14/1997	
2. Principal Place of Business 2a. Mailing Address 21 /4/4 S.E. 17 Pvc 26 /4/4 S.E.			/> 0	4. FEI Number	Applied For
Suite, Apt.		26 /4/4 5.E. Suite, Apt. #, etc.	17 Ave	65-0767095	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	e I	6. Election Campaign Financing	\$5.00 May Be
23 Cape	Coial FC	28 Cape Cotal			Added to Fees
Zip 33'9	Country	29 33993 3	Country	8. This corporation owes or has paid to	
24 55 1	9. Name and Address of Curre		30	Personal Property Tax due June 30 10. Name and Address of New Regis	
ANETH ANALOGO CHARTERED					
AMERICANTER CONTROLL TO THE					
	RAL GABLES FL 33134		82 Street Add	lress (P.O. Box Number is Not Acceptable)	•
CO	MAL GABLES PL 33134		83	719 S.E. 11 PVE	
				· N · · · · · · · · · · · · · · · · · ·	
			84 City	PE CORAL	FL 85 Zip Code 327990
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 registred agent. I 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 appointment of 607.0505, Florida Statutes.					
agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE W. UMWW.					
12,	Signature, typed or primited name of registered ag	pent and filling papplicable (NOTE: ND DIRECTORS	Registered Agent signature requ		DATE
TITLE	DPS OFFICERS AN	DELETE	13.	ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	RAUHUT, UWE		1.2 NAME		Za change Audition
STREET ADDRESS	6080 ESTERO BLVD		1.3 STREET ADDRESS	114 S.E. 17 AVE.	
CITY-ST-ZIP	FT MYERS BEACH FL 33931			APE CORAL FL. 33990	
TITLE	VI	▼ DELETE	14 CITY-ST-ZIP (AFE CORAC, 42. 33490	Change Addition
NAME	SWOBODA, KARL		2 2 NAME		
STREET ADDRESS	6080 ESTERO BLVD		23 STREET ADDRESS		i
CATY-ST-ZIP	FT MYERS BEACH FL 33931		2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME		•	3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE	<u> </u>	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		į
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		
14. I hereby o	ertify that the information supplied v	with this filing does not qualify for		Section 119.07(3)(i), Florida Statutes. I furt	her certify that the information

ompowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in