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 # P97000070133 (8)

G\$ ONE CORPORATION

Principal Place of Business

Mailing Address

FILED May 13 1998 8:00am Secretary of State



BOOK RATON FL-88483		B ooa Raton Fl: 30430		DO NOT WIDTE IN THE PRACE
i.				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
2. Principal Pia	ace of Business	1 2a, Mailing Address		08/13/1997 4. FEI Number Applied For
731	FLORANADA W	1 =	NADA WA	V FIN 65-0825001 Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
27			5. Certificate of Status Desired Fee Required	
City & State	ay Beach	Cily & State	BEACH	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
7 2 1/	Country	7 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Country	8. This corporation owes or has paid the current year Intangible
14 72 T	9. Name and Address of Curren	29 33446 3		Personal Property Tax due June 30. Yes X No 10. Name and Address of New Registered Agent
		r Hegistered Agent	81 Names	10. Name and Address of New Hagistered Agent
SMITH, GERALD (SAME)			81 Nam	AHE) SMITH GERALD
8251-HAMPTON WOOD DRIVE			Street /	Address (P.O. Box Number is Not Acceptable)
804	DA PATON FL 88438	.s Adap	SJ ' 83 - 7-37	TI CULTURION VA WAY
PHAI	voe of Adme			
Chin	vge of ADDRE	4	84 City	FI 85 Zip Code
11. Pursuant te	o t he provisions of Sections 607.0502	2 and 607.1508, Flori da Sta tutes	, the above-named	corporation submits this statement for the purpose of changing its registered
office or re	gistered agent, or both, in the State in familiar with, and accept the obligation	of Florida. Such change was aut	thorized by the corp	poration's board of directors. I hereby accept the appointment as registered
•	n laminar with, and accept the obliga	nions of section our goos, Fiore	da Sidiules.	
SIGNATURE	Signature, typed or printed name of registered ages	of and file if applicable (NOTE F	Registered Agent signature	required when reinstaling) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	Change Addition
NAME	SM ITH, GERALD		1.2 NAME	o Floor and a lilau
STREET ADDRESS	8251 HAMPTON WOOD DRIVI	Ē	1.3 STREET ADDRESS	7314 FLORANAUA WAY DELRAY BEACK FL33446
CITY-ST-ZIP	BOOA RATON FL-38489		1.4 CITY - ST - Z#P	DELRAY BEACK FL33446
TITLE		☐ DELETE	2.1 TITLE	Change
NAME		•	2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP		Document	2. 4 CITY-ST-ZiP	
TITLE		☐ DELETE	3.1 TITLE	L] Change L] Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREFT ADDRESS	
CITY-ST-ZIP		DELETE	34. CITY-ST-ZIP	Change Addition
TITLE		L_ DELETE	4.1 TITLE	L.J Change L.J Addition
NAME ATACCT ADDRESS			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	4.4 City-St-ZiP 5.1 Title	Change Addition
			5.1 ITILE 5.2 NAME	C ountries C volution
STREET ADDRESS			5.3 STREET ADDRESS	
			4	
TITLE		DELETE	5.4 City-St-7/P 6.1 Title	Change Addition
NAME		- Detrie	6.2 NAME	
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS	
CITY-ST-ZIP	ertify that the information supplied wi	th this filing does not auatify for	6.4 CITY-ST-ZIP	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of officer or o	on this annual report or supplementa	l annual report is true and accur river or trustee empo wered to ex	ate and that my sig	nature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in
	<i>-</i> ('			