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 # P97000071782 (1)

GAZUMPERS HOLDING CORPORATION

MIAMI BEACH FL 33140-3326

Principal Piace	of Business	Mailing Ad	dress		
990 ARTHUR GODFREY RD SUITE 116 MIAMI BEACH FL 33140-3326		960 ARTHUR GODFREY RD., SUITE 116 MIAMI BEACH FL 33140-3326		. DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 08/18/1997	
<u>├</u>	ace of Business	2a. Mailing	Address	4. FEI Number	pplied For
21		26			lot Applica
Suito, Apt. #	f, etc.	Suite, A	.pt. #, etc.		Additional lequired
City & State		City & 5	State		May Be to Fees
Zip 24	Country 25	7ip	Country 30	8. This corporation owes or has paid the current year In Personal Property Tax due June 30.	ntangible No
	9. Name and Address of C	urrent Registered Ag	jent	10. Name and Address of New Registered Agent	
	NKEL, JUDITH A ARTHUR GODFREY RD., S	SUITE 116	81 Name	Address (P.O. Box Number is Not Acceptable)	

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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed hence of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	D DELFTE	1.1 TITLE	Change Addition				
NAME	Frankel, Judith A	1.2 NAME					
STREET ADDRESS	960 ARTHUR GODFREY RD., SUITE 116	1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI BEACH FL 33140-3326	1.4 CITY - ST - ZIP					
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition				
NAME		2.2 NAME					
STREET ADDRESS		2.3 STREET ADDRESS					
CITY-ST-ZIP		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	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					
CITY-ST-ZIP		54 CITY-ST-ZIP					
TITLE	☐ DELETE	61 TITLE	Change Addition				
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
		- '					

14. Thereby 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 tystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if changes or on an attachment with an address.

FILED

Mar 06 1998 8:00am

Secretary of State

Applied For Not Applicable