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 # P97000090132 (6)

FILED Apr 15 1998 8:00am Secretary of State

G & S	CONCEPTS,	INC.							
Principal Plac	e of Business		Mailing	Address				{ 10%(100) 110 1111 1001 1001 1001 1001 1001 1001 1001 1001 1001 1001 1001	
4924 BIST A	VE. TERR. F.		4924 8	1ST AVE. TERR. E	<u>.</u>				
SARASOTA FL 34243 SARASOTA FL 34243									
								DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
A Odeninal D	Dans of Business		I On Mail	na Addrana				10/20/1997 4. FEI Number Applied For	
2. Principal Place of Business			2a. Mailing Address					1	
21			Suite, Apt. #, etc.						
Sulte, Apt. #, etc.			├ , '					5. Certificate of Status Desired Security Securi	
22 City & State	Α	City & State							
23			28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		Zip Cou			ntrv		8. This corporation owes or has paid the current year Intangible		
24	,		29		30			Personal Property Tax due June 30. Yes No	
<u></u>		Address of Curren		Agent	100			10. Name and Address of New Registered Agent	
EQ	BER, ALEX S	•	-	- 		81	Name	······································	
	24 81ST AVE. 1					0	Add to the Day North College of the Add to the College of the Coll		
SARASOTA FL 34243						82	Street Addr	Address (P.O. Box Number is Not Acceptable)	
						83		· · · · · · · · · · · · · · · · · · ·	
						84	City	FL 85 Zip Code	
11. Pursuant office or r agent. I a SIGNATURE	to the provisions registered agent, rm familiar with, a	of Sections 607.050; or both, in the State and accept the obliga-	2 and 607.15 of Florida. Su tions of, Sec	08, Florida Statut uch change was a tion 607.05 05, Flo	es, the ab authorized orida Statu	ove l by utes	e-named corp the corporati i.	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
	Signature, typed or prin	nted name of registered age				Age	nt signature require	ed when reinstating) DATE	
12.	- Ka-	OFFICERS AND	DIRECTOR		13.		···-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	OPT	-v A		☐ DELETÉ	1.1 7(7)			☐ Change ☐ Addition	
NAME ESBER, ALEX S						1.2 NAME			
STREET ADDRESS 4924 81ST AVE. TERR. E. CITY-ST-ZIP SARASOTA FL 34243							ADDRESS		
CITY-ST-ZIP	SARASUIA	FL 34243		T OF LETE	1.4 CIT	_	T- ZIP	☐ Change ☐ Addition	
TITLE				☐ DELETE	2.1 TIT			Change Addition	
NAME					2.2 NAI				
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP TITLE		***************************************		DELETE	2. 4 CIT		it - ZIP	Change Addition	
NAME				otter	3.2 NAI			C orange C Modelon	
STREET ADDRESS							ADDRESS		
*					5.0				
CITY-ST-ZIP TITLE				DELETE	3.4. CIT 4.1 TITI		11. TIL	Change Addition	
NAME				- OULCIE	4.2 NA			onergo Musition	
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP									
TITLE				DELETE	4.4 CIT		1-211	Change Addition	
NAME					5.2 NAI			The Crowney Land Florida	
STREET ADDRESS							ADDRESS		
					1				
CITY-ST-ZIP TITLE				DELETE	5.4 CfT 6.1 TiTu		1-417	Change Addition	
NAME					6.2 NA			gand Control	
STREET ADDRESS							ADDRESS		
·					6.4 CIT				
City-St-ZIP	pertify that the info	ormation supplied wi	Ih this filing o	loes not qualify fo				Section 119 07(3Vi). Florida Statutes. I further certify that the information.	

Indicated on this annual report or supplied will unsuming does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further Certify that the informatio 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes on an attachment with in address.

941 270-2021