PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P98000092388

G.N.B. ASSOCIATES, INC.

FILED Aug 03, 1999 8:00 am Secretary of State

08-03-1999 90005 027 ***158.75

Daiss als all Diss		Mailing Address			—	[# # # ### # # # #
Principal Plac		Mailing Address			•	
C/O STEWART & ASSOCIATES C/O STEWART & ASSOCIATES						
	POST OFFICE BOX 100099 FORT LAUDERDALE FL 33310 FORT LAUDERDALE FL 33310 FORT LAUDERDALE FL 33310				DO NOT WRITE IN THIS	SPACE
· · · · · · · · · · · · · · · · · · ·			L 00010		3. Date incorporated or Qualified	
					10/29/1998	
Principal Place of Business 2a. Mailing Address					4 EEI Number	Applied For
· ·	300 Columbia Drive 26 300 Columb			Drive	65-0882684	Not Applicable
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.		// ===	<u></u>	5. Certificate of Status Desired	\$8.75 Additional
22	22 # 3302 27 # 330			Σ,	5. Certificate of Status Desired	Fee Required
- City & State City & State City & State			0 -	1	6Election Campaign Financing-	\$5.00 May Be-
23 (a	23 Cape Canaveral TL 28 Cape Canaver		anavera	d FC	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	Y COM	8. This corporation owes the current year	
24 32	920 25 USA	29 52420	30	<u>US P</u>	Intangible Personal Property.	Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
81 Name				1 Name		
CORPORATION SERVICE COMPANY				82 Street Address (P.O. Box Number is Not Acceptable)		
1201 HAYS STREET						
TALLAHASSEE FL 32301-2525				3		
			8	4 City	 	85 Zip Code
			ا	- Only	FL	_ 00 =
11. Pursuan	t to the provisions of sections 607.0502	and 607.1508, Florida Sta	tutes, the above	e-named corpo	ration submits this statement for the purpose of c	hanging its registered
l office or	registered agent, or both, in the State of am familiar with, and accept the obligation	of Florida. Such change w	as authorized b	v the corporati	on's board of directors. I hereby accept the appo	intment as registered
<u> </u>	am lammar with, and becopt the congu	along bi, about to ricoob,	r iorioa ciatati			
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable.	(NOTE: Registered	Agent signature requ	uired when reinstating) DATE	
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
TITLE	PD	DELETE	1.1 TITLE]		Change Addition
NAME	STEWART, CRAIG		1.2 NAME			8
STREET ADDRESS	300 COLUMBIA DRIVE #3301			ET ADDRESS		١
CITY-ST-ZIP	CAPE CANAVERAL FL 32920	1,4 CI		ST-ZIP		
TITLE		DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAME	:		
STREET ADDRESS			2.3 STREE	ET ADDRESS		1
CITY-ST-ZIP			2.4 CITY	ST-ZIP		<u> </u>
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	.		\
STREET ADDRESS						,
1			3.3 STREI	ET ADORESS		
CITY-ST-ZIP			3.3 STREI 3.4 CITY-			
CITY-ST-ZIP		DELETE		ST-ZIP		Change Addition
-		DELETE	3.4 CfTY-	ST-ZIP		Change Addition
TITLE NAME		DELETE	3.4 CITY- 4.1 TITLE 4.2 NAME	ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS		DELETE	3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE	ST-ZIP		Change Addition
TITLE NAME			3.4 CITY- 4.1 TITLE 4.2 NAME	ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	3.4 CFTY- 4.1 TITLE 4.2 NAME 4.3 STREI 4.4 CITY-	ST-ZIP		

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

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 an attachment with an all dress.

SIGNATINE:

DELETE

___ Change ___ Addition

600054-40005-27 P98000092588

From: GNB Associates

July 27,1999

300 Columbia Drive #3301 Cape, Canaveral, FL 32920

To: Division of Corporations
Annual Reports Filings
P O Box 1500
Tallahassee, FL 32302-1500

To whom it may concern;

A second notice for annual reports filing was received by GNB Associates prior to receiving a first notice. Contact was made with your office and we were instructed to remit the original fee which is enclosed.

Thank you for your assistance with this matter.

President, G N-B Associates