

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 30, 1999 8:00 am  
Secretary of State

04-30-1999 90092 013 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000100343

1. Corporation Name  
G L S HOLDING, INC.

Principal Place of Business  
5400 PARK STREET NORTH  
SUITE PH-9  
ST. PETERSBURG FL 33709

Mailing Address  
5400 PARK STREET NORTH  
SUITE PH-9  
ST. PETERSBURG FL 33709



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/25/1998

4. FEI Number  
59-3554602

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BECK, GEORGE J  
5400 PARK STREET NORTH  
SUITE PH-9  
ST. PETERSBURG FL 33709

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BECK, GEORGE J  
5400 PARK STREET NORTH, SUITE PH-9  
ST. PETERSBURG FL 33709

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

DIRECTOR  
VINACHI, JEFFERY M.

1.3 STREET ADDRESS

175 116th Avenue # 301

1.4 CITY-ST-ZIP

TREASURE ISLAND, FL 33706

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

PRESIDENT, SEC, TREAS  
VINACHI, JEFFERY M.

2.3 STREET ADDRESS

175 116th Avenue # 301

2.4 CITY-ST-ZIP

TREASURE ISLAND, FL 33706

3.1 TITLE

☒ Change ☐ Addition

3.2 NAME

VICE PRESIDENT  
BECK, GEORGE J.

3.3 STREET ADDRESS

5400 Park Street North, Suite PH-9

3.4 CITY-ST-ZIP

ST. PETERSBURG, FL 33709

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 as an attachment with an address, with all other like empowered persons.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFFERY M. VINACHI, President

APR 26 1999

(727) 545 0606

Date

Daytime Phone #

CR2E034 (11/98)