2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000027851

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90186 033 ***150.00

1. Entity Name

GAPCO, INC.

Principal Place of Business	Mailing Address
8725 N.W. 150TH MIAMI FL 33018	8725 N.W. 150TH MIAMI FL 33018-1311

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Miami Florida - Dade	Miami Fla
Suite, Apt. #, etc.: 8725 N.W 150 TERR	Suite, Apt. #, etc.: 8725 N.W 150 TERR
City & State: Miami FL	City & State: Miami FL
Zip: 33018 / Country: DADE	Zip: 33018 / Country: DADE

4. FEI Number: 59 35 68 335 — ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALIHAHI, MEHDI 8725 NW 150TH TERR. MIAMI FL 33018 Note: please Correct above address	Name: MEHDI Alishahi Street Address (P.O. Box Number is Not Acceptable): 8725 NW 150 TERR City: Miami FL Zip Code: 33018

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Mehdi M. Alishahi

Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: president NAME: GLORIA CRISTINA Alishahi STREET ADDRESS: 8725 N.W 150 TERR CITY-ST-ZIP: Miami, Fla 33018	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: MEHDI Alishahi, Agent NAME: 8725 NW 150 TERR STREET ADDRESS: Miami, Fla 33018 CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: President 2/23/00 — Agent 2/23/2000 305-512-8170

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/99)