2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000060475

1. Entity Name

~~GOTHAM GIFT CORPORATION~~

The Gift Gallery Inc.

No Name Chg (Entity)

FILED
Jul 26, 2001 8:00 am
Secretary of State
07-26-2001 90008 021 ***150.00

C0074381

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
929 TWIN LAKES DR. CORAL SPRINGS FL 33071	929 TWIN LAKES DR. CORAL SPRINGS FL 33071-5316

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0933350 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ROSENTHAL, ALAN
3300 UNIVERSITY DR. STE 305
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

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 ______ 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE P NAME Johnny R. Lucibello STREET ADDRESS 929 Twin Lakes DR. CITY-ST-ZIP Coral Springs, FL 33071	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE V/T/S NAME Jacqueline Lucibello STREET ADDRESS 929 Twin Lakes DR. CITY-ST-ZIP Coral Springs, FL 33071	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / 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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CR2E034 (9/99)

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: Jacqueline Lucibello — Jacqueline Lucibello 4/5/00 (954) 752-4013

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

ATTACHMENT

DOC P99000060475

July 23, 2001

C 6074381

Florida Department of State
Division of Corporations

RE: The Gift Gallery
FEI #65-0933350

Enclosed, please find our check for the 2000 UBR. After receiving a second notice, I check sunbiz.org to find the UBR was filed on April 12, 2000. At this time, I suspected that I may have neglected to enclose payment. I check back through the checkbook and concluded a check had not been sent. If any further action is necessary on our part, please inform us at once so that we nay address the issue in a timely manner.

Thank You,
Jacqueline Lucibello

Jacqueline Lucibello

Day-(954) 752-4013
Evening-(954) 752-1430
Fax-(954) 752-5610