

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000077326

FILED  
Mar 15, 2004  
Secretary of State

Entity Name: GAP REALTY, INC.

## Current Principal Place of Business:

248 BLOOMFIELD DR.  
W. PALM BCH, FL 33405

## New Principal Place of Business:

1225 SOUTH OCEAN BOULEVARD  
703  
DELRAY BEACH, FL 33483

## Current Mailing Address:

248 BLOOMFIELD DR.  
W. PALM BCH, FL 33405

## New Mailing Address:

1225 SOUTH OCEAN BOULEVARD  
703  
DELRAY BEACH, FL 33483

FEI Number: 65-0944485

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MATSOUKAS, GEORGE  
248 BLOOMFIELD DR.  
W. PALM BCH, FL 33405

## Name and Address of New Registered Agent:

KLANN, AVERY  
1225 SOUTH OCEAN BOULEVARD  
703  
DELRAY BEACH, FL 33483

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: AVERY KLANN

03/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MATSOUKAS, GEORGE  
Address: 248 BLOOMFIELD DR.  
City-St-Zip: W. PALM BCH, FL 33405

Title: D ( ) Delete  
Name: MATSOUKAS, PETER  
Address: 118 E 60 ST APT 5A  
City-St-Zip: NEW YORK, NY 10022

Title: D (X) Delete  
Name: MATSOUKAS, AMELIA  
Address: 118 E 60 ST APT 5A  
City-St-Zip: NEW YORK, NY 10022

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: KLANN, AVERY R  
Address: 1225 SOUTH OCEAN BOULEVARD #703  
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: D (X) Change ( ) Addition  
Name: BEEBE, EDMUND H  
Address: ONE RIVER PLACE #626  
City-St-Zip: NEW YORK, NY 10036 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AVERY KLANN

D

03/15/2004

Electronic Signature of Signing Officer or Director

Date