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

**PROFIT** CORPORATION-ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # S33100

NAME

STREET ADDRESS CITY-ST-ZIP

**SIGNATURE** 

A PER F

GULF ATLANTIC INDUSTRIES OF AMERICA, INC.

Principal Place	e of Business	Mailing Address							<b>4</b> (8)  8)8)  0	1911 8 1811 9	
18305 BISCAYNE BLVD		18305 BISCAYNE BLVD									
1 30.12 2.0		SUITE 210				DO A	IOT MOIT	re iki tuli	COACE		
NORTH MIAMI BEACH FL 33160 NORTH MIAMI BEACH FL 33160			'			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed					
						02/21/1991	Qualifeu				
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Number				Applied	For
21		26				65-0253574			H	Not App	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.						<u>*</u>	\$8.7	5 Additi	
22	-	27				5. Certifcate of Status D	esired	Œ		Require	
City & Stat	ie	City & State				6. Election Campaign Fi	nancing		\$5.0	00 May	Be
23		28				Trust Fund Contribution	оп		Add	ed to Fe	es
Zip	Country	Zip	Country			8. This corporation owes	s the curr	ent year In		$\mathbf{V}$	
24	25	29 30				Personal Property Ta			Yes	ØΝ	ю
	9. Name and Address of Curren	nt Registered Agent	- 04			10. Name and Address	of New R	legistered	Agent		
COR	RPORATION INFORMATION SERV	ICES INC	81	Name	)						
	I HAYES STREET	10E3, 1NO.		Street	Address	s (P.O. Box Number is No	t Accepta	ble)			
TALLAHASSEE FL 32301						11.50					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			83								
			84	City				FL	85 2	Zip Code	
44 Burniant	to the provisions of Sections 607.950	2 and 607 1509 Florida Statutes th	e above	-named	Lornors	ation submits this statemen	nt for the		f changing	its regis	stered
office or n	enistered agent, or both and state	of Florida, Such change was authori	ized by '	the corp	oration's	s board of directors. I here	eby accep	t the appo	intment as	s registe	red
anent la	m tamiliar will sure a company to the company										
•	m familiar will	Section 607.0505, Florida S	olalules.		i sa .	of dry C	-	1-91	100		
SIGNATURE		FARRA STA	WED	W	iJ/AL/	W Magae		DATE	-99		
•	Signature, typica or printed in the interest agent	nt and title Papplicable. (NOTE Report	WED	W		W Magae					
SIGNATURE	Signature, parties or printed number less week ager OFFICERS AN	nt and title Papplicable. (NOTE Reput ID DIRECTORS	tered Agen	W		nen reinstating)			ND DIREC		N 12 Addition
SIGNATURE	Signature, the or printed natural recovery agent of FICERS AN VP LUDWIG, ROBERT P III	nt and title Prepplicable. (NOTE Rept.)  ID DIRECTORS  DELETE  1	tered Agen 13.	W		nen reinstating)					
SIGNATURE  12.  TITLE	Signature, to be or printed name of the order of the orde	nt and title Prepplicable. (NOTE Regulation of the Prepplicable) (NOTE	tered Agent 13. .1 TITLE	t signature	required wh	nen reinstating)					
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, to a or printed name of the control age.  VP  LUDWIG, ROBERT P III  10110 E BROADVIEW DR  BAY HARBOR ISLAND FL	nt and title Prepplicable. (NOTE Regulation (NOTE Regulation )  ID DIRECTORS  DELETE  1  1	lered Agent 13. .1 TITLE .2 NAME .3 STREET .4 CITY-ST	t signature	required wh	nen reinstating)			☐ Chan	ge 🗆	Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, to the or printed right of the ager OFFICERS AN VP LUDWIG, ROBERT P III 10110 E BROADVIEW DR BAY HARBOR ISLAND FL PST	nt and title Prepplicable. (NOTE Report Prepplicable). (NO	lered Agent 13. .1 TITLE .2 NAME .3 SYREET .4 CITY-ST	t signature	required wh	nen reinstating)				ge 🗆	
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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 the end 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Granged, or on an attractional trusted an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

04-30-1999 90063 040 \*\*\*158.75