

2002 UNIFORM BUSINESS REPORT (UBR)

0036962 AV

DOCUMENT # **S74138**

1. Entity Name
GEHN HOLDINGS, INC.

FILED

02 Aug - 1 AM 9:23

Principal Place of Business
**701 BRICKELL AVENUE
16TH FLOOR
MIAMI FL 33131**

Mailing Address
**701 BRICKELL AVENUE
SUITE 850
MIAMI FL 33131
US**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
801 BRICKELL AVENUE

3. Mailing Address
801 BRICKELL AVENUE

Suite, Apt. #, etc.
16TH FLOOR

Suite, Apt. #, etc.
16TH FLOOR

City & State
MIAMI, FL.

City & State
MIAMI, FL.

4. FEI Number
65-0284022

Applied For
Not Applicable

Zip
33131

Country
USA

Zip
33131

Country
USA

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEMS
1200 S PINE ISLAND ROAD
PLANTATION FL 33324**

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
**DPST
SULLIVAN, JOHN S
RESIDENCE PARK SANT ROMAN APT 802
MONTE CARLO, MONACO 33131** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPST
DE OTADUY, JAVIER
RESIDENCE PARK SANT ROMAN APT. #802
AVENIDA SANT ROMA
98000 MONTECARLO, MONACO** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
SULLIVAN, JOHN S
701 BRICKELL AVENUE SUITE 850
MIAMI FL 33131** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**000006947370--0
-08/07/02--01055--017
*****600.00 ******* ☐ Change ☐ Addition

TITLE
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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:

SIGNATURE REQUIRED

7/12/02

305-381-8340

CR2E034 (4/02)