

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

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Mar 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S95610 (9)
1. Corporation Name
GULF STATE MANAGEMENT, INC.

Principal Place of Business % 5959 CENTRAL AVENUE SUITE 201 ST. PETERSBURG FL 33710	Mailing Address % 5959 CENTRAL AVENUE SUITE 201 ST. PETERSBURG FL 33710
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7640 66th Street Suite, Apt. #, etc. 22 City & State 23 Pinellas Park, FL Zip Country 24 33781-3103 U.S.A.		2a. Mailing Address 26 7640 66th Street Suite, Apt. #, etc. 27 City & State 28 Pinellas Park, FL Zip Country 29 33781-3103 U.S.A.		3. Date Incorporated or Qualified 11/21/1991	
g. Name and Address of Current Registered Agent VERONA, JAY B 5959 CENTRAL AVENUE, SUITE 201 ST. PETERSBURG FL 33710		4. FEI Number 59-3099889		Applied For Not Applicable	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		10. Name and Address of New Registered Agent 81 Name VERONA & FREEMAN, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 7235 FIRST AVENUE SOUTH 83 84 City ST. PETERSBURG FL 85 Zip Code 33707	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LAFKOWITZ, LARRY M. 7630 66TH STREET N PINELLAS PARK FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PD LAFKOWITZ, LARRY M. 7640 66th STREET N PINELLAS PARK FL 33781-3103
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST LAFKOWITZ, JEFFREY B. 7630 66TH STREET NORTH PINELLAS PARK FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	ST LAFKOWITZ, JEFFREY B. 7640 66th STREET N PINELLAS PARK FL 33781-3103
TITLE NAME STREET ADDRESS CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	

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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jeffrey B. Lafkowitz* 3/4/98 812-541-3488

CR2E034 (10/97)