

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V06158 (2)

1. Corporation Name

GULFSHORE SYSTEMS, INC.



Principal Place of Business

3128 ARAPAHO ST
SARASOTA FL 34231

Mailing Address

3128 ARAPAHO ST
SARASOTA FL 34231

3. Date Incorporated or Qualified
01/10/1992

3a. Date of Last Report
04/12/1995

2. Principal Place of Business

21 1717 2nd St

22 Suite H

23 Sara FL

24 34236

25 Sara

2a. Mailing Address

26 1717 2nd St

27 Suite H

28 Sara FL

29 34236

30 Sara

4. FEI Number
65-0335439

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BALAM, VAN J
2305 MIETAW DRIVE
SARASOTA FL 34239

10. Name and Address of New Registered Agent

81 Name Van J Balam

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

3128 Arapaho St (Home)

83

84 City Sara

FL

85 Zip Code
34231

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.

SIGNATURE Van J Balam

(NOTE: Registered Agent signature required when reinstating)

3-8-96

DATE

12. OFFICERS AND DIRECTORS

TITLE DSPT ☐ DELETE
NAME BALAM, VAN J.
STREET ADDRESS 3128 ARAPAHO ST.
CITY-STATE-ZIP SARASOTA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE (OFFICE) ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1717 2nd St Suite H
1.4 CITY-STATE-ZIP Sara FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

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-03/16/96--01001--006
***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Van J Balam

2-22-96

941-366-7795

Date

Daytime Phone

CR2E034 (12/95)