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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V33836 (0)

FILED

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SECONDARY OF STATE TALLALVASSEE, FLORIDA

GOLD COAST FUNDING GROUP, INC.				The state of the s	
GOLD	JUMBI FUNDING GNOUP	'i INO		I DESIGNATION THE STATE OF THE	N GIBNI BIGNI BIGNI BAGNI (BB)
Principal Place	e of Business	Mailing Address			if whom whom when their hoo!
2887 SO UNIVERSITY DR 2887 S UNIVERSITY DR.					
DAVIE FL 33328 DAVIE FL 33328					
US		US		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 05/04/1992	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0327509	Not Applicable
<u> </u>		Suite, Apt. #, etc.	-		\$8.75 Additional
27		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	<u> </u>
24	g, Name and Address of Cur		30	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
ADf	OTO, BENEDICT J.	Aire - Indiana on Whatir	81 Name	10. Home and Coness of Her Hellstein	77g-2116
	80 SW 1ST ST				
PLANTATION FL 33324			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	WINNOW E COOPT		83		
					1-1
			84 City	FI	85 Zip Code
11. Pursuant t	o the provisions of Sections 607.0	502 and 607.1508, Florida Statutes	s, the above-named corp	oration submits this statement for the purpose	of changing its registered
office or re agent. Lar	egistered agent, or <b>b</b> oth, in the Sti m f <b>am</b> iliar with, an <b>d a</b> ccept the ob	ate of Florida. Such change was at ligations of, Section 607.0505, Flor	ithorized by the corporati ida Statutes.	ion's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	,				
	Signature, typed or printed name of registered		Registered Agent signature require		
12.	OFFICERS /	AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12  Change Addition
TITLE	ARDITO, BENEDICT J.		1.1 TITLE 1.2 NAME		☐ Change ☐ Addition
NAME STREET ADDRESS	10180 SW 1ST ST				,
CITY-ST-ZIP	PLANTATION FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	EGAN, STEVEN		2.2 NAME	600002298	
STREET ADDRESS	10600 S.W. 51 ST.		2.3 STREET ADDRESS	600002398! -01/13/980	1078003
Fry-ST-ZIP	DAVIE FL 33328		2. 4 CHTY - ST - ZIP	****150,00	****150.00
TLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
AME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
- STREET ADDRESS	-		4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELET <b>e</b>	4.4 CITY-ST-ZIP		Change Addition
TITLE			5.1 TITLE	5/	Change Addition
NAME STREET ADDRESS			5.2 NAME	76 1.4-98	
			5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	1.7	
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	•	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		:
	artifuthat the information aunalias	with this films does not smallfules		Section 119 07/3/6\ Florida Statutos I further o	artifu that the information

nereby certify that the information supplied with this filling 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 12 if changed or on an attackment with an address.

(954) 452-2714

CR2E034 (10/97)