2001 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2001 8:00 am Secretary of State **DOCUMENT #. V.45392** 1. Entity Name GULF ISLAND, INC. 04-30-2001 90425 034 ***150.00 Principal Place of Business Mailing Address 865 LEONARD DR. 865 LEONARD DR. ^ WESTBURY NY 11590 WESTBURY NY 11590 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 58-2010269 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HAMLIN, CURTIS D. -----Street Address (P.O. Box Number is Not Acceptable) 1205 MANATEE AVE. WEST **BRADENTON FL 34205** City 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) -FILE-NOW!!!-FEE-IS \$150.00---9. This corporation is eligible to satisfy its Intangible __ = ---10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, Change ☐ Delete TITLE TITLE O'CONNOR, JOHN T NAME NAME 95 BROAD HOLLOW RD STREET ADDRESS STREET ADDRESS **MELVILLE NY 11747** CITY-ST-ZI Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP TITLE Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP \square Delete TIT! F Change [] Addition TITLE

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 life empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/01

516 869-7158

Daytime Phone #

Machment

BETTY ANN LO PINTO 865 LEONARD DRIVE WESTBURY, NY 11590 516 333-8491 (Home) 516 869-7158 (Business)

#*V45392* 153837

April 23, 2001

Division of Corporations PO Box 6327 Tallahassee, FL 32314

> Re: Gulf Island, Inc. 58-2010269

Dear Sir or Madam:

With regard to the above-referenced corporation, attached please find a copy of the filed 2000 Uniform Business Report, on which it was clearly indicated that Mr. John T. O'Connor was to be added as President.

Unfortunately, the addition was incorrectly processed as a change, and my position of Director was incorrectly deleted.

I have made the appropriate correction on the 2001 Report and would hope that it will be processed correctly this year. to Table 1997 of the style of the same of the

Rather than waiting another year to confirm the correction, I would appreciate your confirming receipt and correction of the officers of the Gulf Island, Inc. by signing the additional copy of this letter where indicated and returning it in the envelope provided.

bal

Attachments

RECEIPT & CORRECTION ACKNOWLEDGED:

FLORIDA DIVISION OF CORPORATIONS

Mudają gaba į et ir lygi ed ir elekt. By: 1000 to 1000 Date:

FLORIDAST.LTR