

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V50900

1. Entity Name  
GULF INDUSTRIAL VENTURES, INC.



**FILED**  
**Jan 23, 2003 8:00 am**  
**Secretary of State**

01-23-2003 90153 049 \*\*\*150.00

Principal Place of Business  
1100 COMMERCIAL BLVD  
#118  
NAPLES FL 34104

Mailing Address  
1100 COMMERCIAL BLVD  
#118  
NAPLES FL 34104



2. Principal Place of Business

3. Mailing Address

3073 SOUTH HORSESHOE DRIVE

SUITE 118

NAPLES, FLORIDA 34104

☐ CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City

City & State

4. FEI Number 65-0354350

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARNOLD, DONALD L.  
1100 COMMERCIAL BLVD  
#118  
NAPLES FL 34104

Name

Street Address 3073 SOUTH HORSESHOE DRIVE

SUITE 118

NAPLES, FLORIDA 34104

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 *Donald L. Arnold*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/18/03  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees  
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME ARNOLD, DEAN A.  
STREET ADDRESS 1100 COMMERCIAL BLVD #118  
CITY-ST-ZIP NAPLES FL 34104 ☐ Delete

TITLE  
NAME 3073 SOUTH HORSESHOE DRIVE ☐ Change ☐ Addition  
STREET ADDRESS SUITE 118  
CITY-ST-ZIP NAPLES, FLORIDA 34104

TITLE D  
NAME ARNOLD, TAMARA D.  
STREET ADDRESS 1100 COMMERCIAL BLVD #118  
CITY-ST-ZIP NAPLES FL 34104 ☐ Delete

TITLE  
NAME 3073 SOUTH HORSESHOE DRIVE ☐ Change ☐ Addition  
STREET ADDRESS SUITE 118  
CITY-ST-ZIP NAPLES, FLORIDA 34104

TITLE D  
NAME ARNOLD, ANDREA K.  
STREET ADDRESS 1100 COMMERCIAL BLVD #118  
CITY-ST-ZIP NAPLES FL 34104 ☐ Delete

TITLE  
NAME 3073 SOUTH HORSESHOE DRIVE ☐ Change ☐ Addition  
STREET ADDRESS SUITE 118  
CITY-ST-ZIP NAPLES, FLORIDA 34104

TITLE D  
NAME ARNOLD, DONALD L.  
STREET ADDRESS 1100 COMMERCIAL BLVD  
CITY-ST-ZIP NAPLES FL 34104 ☐ Delete

TITLE  
NAME 3073 SOUTH HORSESHOE DRIVE ☐ Change ☐ Addition  
STREET ADDRESS SUITE 118  
CITY-ST-ZIP NAPLES, FLORIDA 34104

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Donald L. Arnold*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/03  
Date Daytime Phone #

CR2034 (10/02)