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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90207 013 ***150.00

1999 **DOCUMENT # 393304**

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

G.H. BROTHERS INVESTMENT CORP

SIGNATURE. Eloy Gonzalez

Principal Place of Business	Mailing Address	
191 SW 114TH AVE SWEETWATER FL 33174	191 SW 114TH AVE SWEETWATER FL 33174	3. Date incorporated or Qualifed 12/30/1971

26

27

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1448728

5. Certificate of Status Desired

6. Election Campaign Financing

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

City & State	9	City & State				Trust Fund Contribu	tion	Added	o Fees
23		28	<u> </u>	Country		8. This corporation ow	es the current year inte	ngible	
Zip	Country	<u>Zi</u> p		Country	•	Personal Property T	AX.	🖄 Yes	□No
24	25	29	30	<u> </u>		10. Name and Address	of New Registered	Agent	
	9. Name and Address of Current	Registered Agent			<u> </u>	10. Name and Addison			!
				81	Name	:			
GONZAI	LEZ (ELOY)			82	Street	Address (P.O. Box Number is N	lot Acceptable)		
191 S	W 114TH AVE								
MIAMI				83	-				
MIAMI	. 1 33174							85 Zip	Code
	•			84	City	•	FL		
	to the provisions of Sections 607.0502		- Chabdon A	to obout	camed	composition submits this statem	ent for the purpose of	changing its	registered
11. Pursuant l	to the provisions of Sections 607.0502 egistered agent, or both, in the State of accept the obligation	and 607.1508, Florid f Florida, Such chang	a Statutes, t e was autho	ne above	the corpo	pration's board of directors. I he	reby accept the appoir	imeni as re	gistered
office of re	egistered agent, or both, in the State on familiar with, and accept the obligation	ons of, Section 607.0	505, Florida	Statutes.				_	
•	III Ignimai wou, and doorp.						DATE		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Reg	ssered Agen	egneture r	equired when remotating)	ES TO OFFICERS AN	n DIRECTO	ORS IN 12
	OFFICERS AND	DIRECTORS		<u> 13. </u>		ADDITIONS/CHANG	ES TO OFFICE ASSESSED	Change	Addition
12.			LETE	1.1 TITLE					
TITLE	D			12 NAME					٠
NAME	ARNOLDO, ELIGIO			1.3 STREET	ADORESS				
STREET ADDRESS	191 SW 114 AVE			1.4 CTY-51					
CITY-ST-ZIP	MIAMI FI.	□ DE	I ETE	21 TITLE			•	Change	■ Addition
TITLE .	PD	عن ت	<u>-</u> '- [
NAME	GONZALEZ, ELOY			22 NAME		· ·			
STREET ADDRESS	191 SW 114 AVE		ı	23 STREET		,			
i i	MIAMI, FL			2.4 CITY-S	T-ZP			Change	☐ Addition
CITY-ST-ZIP	D	□ DE	LETE	3.1 TITLE		'		_	
i	GONZALEZ, ABILIO			32 NAME		, .			
NAME	191 SW 114 AVE			3.3 STREET	ADDRESS		سنده سننومريا		د رین نے جا می د سے
* STREET ADDRESS	MIAMI, FL			3.4. CITY-S	T-ZIP			Channe	Addition
CITY-ST-ZIP	D	· D 08	LETE	4.1 TITLE				Change	C. Addition
TITLE	_	_		4.2 NAME		 			
NAME	GONZALEZ, OSCAR			435REE1	ADDRESS	l :			
STREET ADDRESS	191 SW 114 AVE			•		i			
CITY-ST-ZIP	MIAMI, FL			4.4 CITY-ST	- 200			☐ Change	Addition
TITLE	" U	□ DE	TEIE	5.1 TITLE		i '			
NAME	GONZALEZ, RENE		i	52 NAME		1			
STREET ADDRESS	191 SW 114 ave		ı	5.3 STREET					
	MIAMI, FL			5.4 CITY-ST	- ZP	<u> </u>		Change	☐ Addition
CITY-ST-ZIP		☐ DE	LETE	6.1 TITLE	-	'			_
TILE				6.2 NAME					
NAME			i	6.3 STREET	ADDRESS	Į			
STREET ADDRESS				6.4 CITY-S1	T-ZP	<u> </u>			
CTTY-ST-ZP	certify that the information supplied with	n this filing does not o	walify for the	exempti	on stated	in Section 119.07(3)(i), Florida	Statutes, I further cer	iny that the er oath: that	iniomiation I am an
14. I hereby	certify that the information supplied will on this annual mood or supplemental	annual report is true	and accurate	and that	my sign	ature shall have the same legal	la Statutes; and that m	y name app	ears in
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. If funder under oath: that I am an 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 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 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 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 indicated on this annual report or supplemental 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 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 indicated on this annual report or supplemental annual report of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. If the under oath: that I am an indicated on this annual report or supplemental annual report of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. If the under oath: that I am an indicated on this annual report of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. If the under oath: that I am an indicated on this annual report of the corporation or the receiver of the corporation of the corporation of the corporation of the corporation of the corpora									
Block 12	or Block 13 if changed, or on an attack	DISCUS MILLI BY STORES	(0)		•	na h	1/99 305	د اوران م	1300
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