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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 467435

(4)

G.V.H. ENTERPRISES, INC.

Mailing Address

FILED Feb 12 1998 8:00am Secretary of State



5252 W. FLAGLER ST. MIAMI FL 33134		5252 W. FLAGLER ST. MIAMI FL 33134	5252 W. FLAGLER ST. MIAMI FL 33134						
	••	***************************************				DO NOT WRITE IN	THIS SP.	ACE	
						3. Date Incorporated or Qualified		Y	
B. Delaniant Di	lana of Charleson	T So Mailing Address	2a. Mailing Address			01/13/1975 4. FEI Number		1 14.	ntind For
<u>-</u>	ace of Business	— <u> </u>	Hi *						J
Suite, Apt.	# 616	Suite, Apt. #, etc.				59-1569521			
22		27	27			5. Certificate of Status Desired Section 5. Section 5. Section 5. Section 5. Section 6.			
City & State		City & State	City & State			6. Election Campaign Financing	_	\$5.00	
23		28	· · · · · · · · · · · · · · · · · · ·				<u> </u>	Added	
Zip	Country	Ζφ	Country	1		8. This corporation owes or has paid to			
24	25 29 30 30 9. Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent					J No
		rent Registered Agent	81	T	vame	10. Name and Address of New Negra	stered Ag	erit	
	RQUEZ, JOSE M.		<u>[" </u>		lanie				
782 #54	! Lejeune RD. 18		82	S	itreet Addres	ss (P.O. Box Number is Not Acceptable))	· · · · · · · · · · · · · · · · · · ·	
,	.MI FL 33126		83						
			84	С	City		FL	85 Zip	Code
11. Pursuant I	to the provisions of Sections 607.	0502 and 607.1508, Florida Stati	utos, the above	e-ne	amed corpo	ration submits this statement for the purp	pose of c	hanging It	s registered
office or re	egistered agent, or both, in the St	tate of Horida, Such change was	authorized by	y the	e corporatio	ration submits this statement for the purplin's board of directors. I hereby accept the	he appoir	ntment as	registered
!	m taximar with, and accept the co	ingations of exection oor execu-	TOTICA STATUTE	.					
SIGNATURE	Signature, typed or printed ranne of registered	d agent and titln if applicable (NC	OTE: Registered Age	enl e	gnature required	d when reinstating)	DATE		
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER			
TITLE	DV	DELETE	1.1 TITLE				L	Change	Addition
NAME	HERRAN, ANTOLIN G		1.2 NAME						1
STREET ADDRESS	6001 SW 84 AVE.		1.3 STREET	ADD	DRESS				
CITY-ST-ZIP	MIAMI, FL 00000		1,4 CITY - 5	ST - Z1	IP.				
TITLE	SD	DELETE	2.1 TITLE				L	Change	Addition
NAME	GUERRA, JORGE		2.2 NAME						
STREET ADDRESS	8440 SW 58TH ST.		2.3 STREET	ADD	DRESS				
City-St-Zip	MIAMI, FL 00000		2. 4 CITY-	\$1 - Z	ZIP				
TITLE	PD	☐ DELETE	3.1 T(TLE				L	Change	Addition
NAME	HERRAN, MANUEL A		3.2 NAME						
STREET ADDRESS	8460 S.W. 5TH STREET		3.3 STREET	OCA 1	DRESS				
CITY-ST-ZIP	MIAMI, FL 00000		3.4. CITY-	ST-Z	ZIP				
TITLE	D	DELETE	4.1 TETLE				L	Change	Addition
NAME	GUERRA, ARMANDO J.		4. 2 NAME						
STREET ADDRESS			4.3 STREET	4.3 STREET ADDRESS					
CITY-ST-ZIP	CORAL GABLES FL		4.4 CiTY-5	4.4 City-St-ZiP					
TITLE		☐ DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5 3 STREET	T ADD	DRESS				
CITY-ST-ZIP			5.4 CITY - S	ST - Zi	JP .				
TITLE		☐ DELETE	6.1 TITLE					Change	Addition
NAME			62 NAME						
STREET ADDRESS			6.3 STREET	r add	DRESS				
!			•			•			

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. 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 changes, or on an all achiment with an address.

305-444-7824