

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000083040

Entity Name: G G 2 CORPORATION

FILED  
Aug 31, 2007  
Secretary of State

**Current Principal Place of Business:**

3907 E 20TH ST  
HOMESTEAD, FL 33033

**New Principal Place of Business:**

3907 NE 20TH ST  
HOMESTEAD, FL 33033

**Current Mailing Address:**

3907 E 20TH ST  
HOMESTEAD, FL 33033

**New Mailing Address:**

3907 NE 20TH ST  
HOMESTEAD, FL 33033

FEI Number: 65-1042856

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PORTES, KARINA  
1448 EAST HOWRY DT  
3-201  
HOMESTEAD, FL 33030 US

**Name and Address of New Registered Agent:**

PORTES, KARINA  
3907 NE 20 TH ST  
HOMESTEAD, FL 33033 US

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: \_\_\_\_\_

Electronic Signature of Registered Agent

08/31/2007

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPS ( ) Delete  
Name: PORTES, KARINA  
Address: 1448 EAST HOWRY DT  
City-St-Zip: HOMESTEAD, FL 33030

Title: DVT ( ) Delete  
Name: GIL, JOSE GABRIEL  
Address: 1448 EAST HOWRY DT  
City-St-Zip: HOMESTEAD, FL 33030

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPS (X) Change ( ) Addition  
Name: PORTES, KARINA  
Address: 3907 NE 20TH ST  
City-St-Zip: HOMESTEAD, FL 33033

Title: DVT (X) Change ( ) Addition  
Name: GIL, JOSE GABRIEL  
Address: 3907 NE 20TH ST  
City-St-Zip: HOMESTEAD, FL 33033

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE GABRIEL GIL

Electronic Signature of Signing Officer or Director

DVT

08/31/2007

Date