

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 17, 2003 8:00 am**  
**Secretary of State**

03-17-2003 91080 022 \*\*\*150.00

**DOCUMENT # P02000021857**

1. Entity Name  
**GMQ MOSAICOS, INC.**



Principal Place of Business  
**330 N CONGRESS AVENUE  
DELRAY BEACH FL 33446**

Mailing Address  
**330 N CONGRESS AVENUE  
DELRAY BEACH FL 33446**



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
**3100 S. Congress Ave**

3. Mailing Address  
**3100 S. Congress**

Suite, Apt. #, etc.  
**# 6**

Suite, Apt. #, etc.  
**# 6**

City & State  
**Boynton Bch. FL.**

City & State  
**Boynton Bch. FL.**

4. FEI Number  
**02-0555852**

Applied For  
Not Applicable

Zip  
**33426**

Country  
**USA**

Zip  
**33426**

Country  
**USA**

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

6. Name and Address of Current Registered Agent

**FRIEDMAN, MARC  
8634 NW 59TH PLACE  
PARKLAND FL 33067**

7. Name and Address of New Registered Agent

Name **GEORGE GRUBISA**  
Street Address (P.O. Box Number is Not Acceptable)  
**9905 LIBERTY RD.**  
City **BOCA RATON FL** Zip Code **33434**

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 DATE **1-10-03**  
(NOTE: Registered Agent signature required when reinstating)

**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  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **MUTI, SOFIA**  
STREET ADDRESS **330 N CONGRESS AVENUE**  
CITY-ST-ZIP **DELRAY BEACH FL 33446**

TITLE **D** ☐ Delete  
NAME **GRUBISA, GEORGE**  
STREET ADDRESS **330 N CONGRESS AVENUE**  
CITY-ST-ZIP **DELRAY BEACH FL 33446**

TITLE **D** ☒ Delete  
NAME **QUINTERO, LUIS ENRIQUE**  
STREET ADDRESS **330 N CONGRESS AVENUE**  
CITY-ST-ZIP **DELRAY BEACH FL 33446**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition  
NAME **GEORGE GRUBISA**  
STREET ADDRESS **9905 LIBERTY RD**  
CITY-ST-ZIP **BOCA RATON FL. 33434**

TITLE **VP** ☒ Change ☐ Addition  
NAME **SOFIA MUTI**  
STREET ADDRESS **620 NW 10th ct.**  
CITY-ST-ZIP **Boynton Bch FL. 33426**

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

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

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

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

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: **GEORGE GRUBISA** DATE **1-10-03** **561-315-8838**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)