

2002 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000036468
 1. Entity Name
G-P MX. INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2295 CORPORATE BLVD. NW
 Suite, Apt. #, etc. Ste 222

3. Mailing Address
2295 CORPORATE BLVD NW
 Suite, Apt. #, etc. Ste 222

DO NOT WRITE IN THIS SPACE

City & State
Boca Raton FL 33431
 Zip 33431 Country USA

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Boca Raton FL 33431
 Zip 33431 Country USA

4. FEI Number
65-0579173

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ State **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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
 After May 1, Fee is \$530.00
 Amended UBR is \$61.25
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PDST	NORTON HERRICK	2295 CORPORATE BLVD NW STE 222	BOCA RATON, FL 33431				
VPAS	HOWARD HERRICK	2 RIDGEDALE AVE STE 370	CEDAR KNOLLS, NJ 07927				
VPAS	MICHAEL HERRICK	2 RIDGEDALE AVE STE 370	CEDAR KNOLLS NJ 07927				
	NISAR, KERMAH	2 RIDGEDALE AVE, STE 370	CEDAR KNOLLS NJ 07927				

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] VP 3/12/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2ED348 (12/01)