2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State
04-05-2004 90009 023 ***150.00

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1. Entity Name
G&J IMPORT & EXPORT, INC.

Principal Place of Business	Mailing Address
20803 BISCAYNE BLVD SUITE 101 AVENTURA, FL 33180 US	20803 BISCAYNE BLVD SUITE 101 AVENTURA, FL 33180 US

03262004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
10800 Biscayne Blvd.	10800 Biscayne Blvd
Suite, Apt. #, etc.: 310	Suite, Apt. #, etc.: 310
City & State: Miami FL	City & State: Miami, FL
Zip: 33161 Country: U.S.A.	Zip: 33161 Country: U.S.A.

4. FEI Number 65-0847604 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RAMIREZ, ROCIO 3400 NE 192 ST #1410 AVENTURA, FL 33180	Name: Street Address (P.O. Box Number is Not Acceptable): 3370 NE 190 Street Apt 1015 City: Aventura FL Zip Code: 33180

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 [signature] Rocio Ramirez 3/26/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VPSD	☐ Delete
NAME	RAMIREZ, ROCIO	
STREET ADDRESS	3400 NE 192 ST #1410	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	VPD	☒ Delete
NAME	RAMIREZ, ROCIO	
STREET ADDRESS	1200 BRICKELL AVE., SUITE 1440	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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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 [signature] Rocio Ramirez 3/26/04 (305) 466-4464
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #