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

PROFIT CORPORATION ANNUAL. REPORT

1997

Principal Place of Business

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT # S64376

(4)

Mailing Address

G ASSOCIATES, INCORPORATED

FILED	
Apr 23 1997 8:00a	m
Secretary of State	e

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2. Principal Place of Business	Applied For Not Applied For S. 75 Additional Fee Required S. 700 May Be Added to Fees Intangible tax under s. 199.032, Yes Not
2. Principal Place of Business 2a. Mailing Address 59-3075736 2b. Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State Country 25 29 Country 29 30 Country 4. FEI Number 59-3075736 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution 8. This corporation has liability for Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New For	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Intangible tax under s. 199.032, Yes No No Registered Agent Applied For Note Required \$5.00 May Be Added to Fees Intangible tax under s. 199.032, Yes No Registered Agent Applied For Note Required Fee Required \$5.00 May Be Added to Fees Intangible tax under s. 199.032, Yes No Registered Agent
Suite, Apt. #, etc. 22 27 City & State City & State 28 28 Country 25 29 29 30 Country 25 29 30 Country 25 30 Country 25 30 Country 26 30 Country 30 Replace Address of Current Registered Agent GIANESKIS, DINO M. 1304 E. OAKWOOD ST. TARPON SPRINGS FL 34689 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution Country 8. This corporation has liability for Florida Statutes 10. Name and Address of New Florida Statutes 81 Name 82 Street Address (P.O. Box Number is Not Accept	Not Applicable
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City & State Country Zip Country Zip Country Zip Country Statuces Florida Statutes Florida Statutes Name and Address of Current Registered Agent GIANESKIS, DINO M. 1304 E. OAKWOOD ST. TARPON SPRINGS FL 34689 City & State City & State Country State Country State Country State Agent B1 Name Street Address (P.O. Box Number is Not Accept	Added to Fees (intangible tax under s. 199.032, Yes No legistered Agent able) FL 85 Zip Code
Zip Country Zip Country 30 Street Address (P.O. Box Number is Not Accept TARPON SPRINGS FL 34689	rintangible tax under s. 199.032, Yes No legistered Agent able) FL 85 Zip Code
25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent GIANESKIS, DINO M. 1304 E. OAKWOOD ST. TARPON SPRINGS FL 34689 130 Florida Statutes 10. Name and Address of New F	Yes No legistered Agent able) FL 85 Zip Code purpose of changing its registered
9. Name and Address of Current Registered Agent GIANESKIS, DINO M. 1304 E. OAKWOOD ST. TARPON SPRINGS FL 34689 10. Name and Address of New F	FL 85 Zip Code
1304 E. OAKWOOD ST. TARPON SPRINGS FL 34689 B2 Street Address (P.O. Box Number is Not Accept	FL 85 Zip Code
1304 E. OAKWOOD ST. TARPON SPRINGS FL 34689 82 Street Address (P.O. Box Number is Not Accept	FL 85 Zip Code
TARPON SPRINGS FL 34689	FL 85 Zip Code
	purpose of changing its registered
	purpose of changing its registered
	purpose of changing its registered
84 City	purpose of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	
SIGNATURE Signature, typind or printed name of registered agent and tice if applicable (NOTE Registered Agent signature required when rainstalling)	DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFF	
TITLE D DILETE 1.3 TOLE	Change Addition
NAME GIANESKIS, DINO M. 1.2 NAME	
STREET ADDRESS PO BOX 233 N/A 1.3 STREET ADDRESS	1
CITY-SI-ZIP TARPON SPRINGS FL 1.4 DITY-SI-ZIP	
TITLE D DELETE 21 TITLE	Change Addition
NAME QIANESKIS, PATRICIA M. 22 NAME	
STREET ADDRESS P O BOX 233 N/A 23 STREET ADDRESS	
CITY-ST-ZIP TARPON SPRINGS FL 2 4 CITY-ST-ZIP	·
TITLE DELETE 3.1 101E	Change Addition
NAME 3.2 NAME	
STREET ADDRESS 33 STREET ADDRESS	1
CITY-\$T-2IP 3.4. CITY-\$1-7IP	
TITLE DELETE 4.1 TITLE	Change Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-\$1-ZIP 4.4 CITY-\$1-ZIP	
TITLE DELETE 5.1 TITLE	Change Addition
NAME 52 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
GITY-\$T-2IP 5.4 CITY-\$1-2IP	
TITLE DELETE 61TITLE	Change Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
GITY-ST-ZIP 64 CITY-S1-ZIP	
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statu	es. 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 learn an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: **CAMPSKS** **AUTOMATICAL PROPERTY OF THE PROPERTY OF	nal effect as if made under eath: that i