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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000023773 (2)

GENTLEMEN INVESTMENT GROUP, INC.

1721 TIGERT COCONUT G	RAIL AVE. ROVE FL 33133	1721 TIGERTRA COCONUT GRO	IIL AVE. DVE FL 33133-3324						
								Date of Last Report 4/08/1996	
2. Principal Place of Business 2a. Mail			ailing Address			4. FEI Number	Applied For		
21		26	26			65-0647883 Not Applicab			t Applicable
Suite, Ap	ot. #, etc.	<u></u> ⊢1	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
22 City & St	ale		City & State			6. Election Campaign Financing \$5,00 May Be			
23	ate	28	₁			Trust Fund Contribution	Added to Fees		
Zip	Country	Zφ	C	ountry	· —	8. This corporation has liability for it	ntangible t	ax under s.	. 199.032,
24	25	29	30			Florida Statutes] Yes 💢	No	
9. Name and Address of Current Registered Agent					,	10. Name and Address of New Reg	gistered A	gent	
11. Pursual	or registered agent, or both, in the St I am familiar with, and accept the ob-	ate of Florida. Such ch digations of, Section 60	ange was authori. 17.0505, Florida S	red by tatute	e-named cor y the corpora s	poration submits this statement for the p tion's board of directors. Thereby accep	FL urpose of a time appo	85 Zip Changing its	s registered
12.		AND DIRECTORS	(\tag{1.5}			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
TITLE	PDV		DELETE 1.1	TILLE				Change	Addition
NAME	SILVA, CARLOS E 12		NAME						
STREET ADDRES				STREET	ADDRESS				
CITY-ST-ZIP	COCONIT ODOVE EI			4 GHY-S1 - ZIP					
TITLE			TIFLE				Change	Addition	
NAME			2.2 NAME		•				
STREET ADDRES	OCCONITY ODONE EL 22122		2 3 STREET ANDRESS 2 4 CITY-ST-ZP						
CITY-ST-ZIP TITLE	TSD TSD		·	4 CITY - LTIFLE	SI-ZiP			Change	Addition
NAME	SILVA, JORGE E		•	NAME			ı	0.10.190	

64 CITY-SI-7IP

14. I do hereby certify that the information supplied with this filing odes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY - \$1 - ZIP

4.4 CITY - ST - ZIP

3.4. CITY - ST - Z-P

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

61 TITLE

6.2 NAME

DELETE

DELETE

DELETE

Dilling

1721 TIGERTRAIL AVE.

COCONUT GROVE FL 33133

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADORESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE NAME

12/92 8/8/12

☐ Change

Change

Addition

Addition

Addition

FILED

Jan 29 1997 8:00am

Secretary of State