

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075753

Entity Name: G.M. PROPERTY CORP.

FILED  
Aug 20, 2009  
Secretary of State

## Current Principal Place of Business:

22 NE 1ST ST  
SUITE 123  
MIAMI, FL 33132

## New Principal Place of Business:

26 NE 1ST ST  
MIAMI, FL 33132

## Current Mailing Address:

55 NE 1ST STREET  
12  
MIAMI, FL 33132

## New Mailing Address:

26 NE 1ST STREET  
MIAMI, FL 33132

FEI Number: 02-0585973

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMINOV, ABRAM  
55 NE 1ST STREET  
12  
MIAMI, FL 33132 US

## Name and Address of New Registered Agent:

AMINOV, ABRAM  
26 NE 1ST STREET  
MIAMI, FL 33132 US

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: ABRAM AMINOV

08/20/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: AMINOV, ABRAM  
Address: 55 NE 1ST ST SUITE 12  
City-St-Zip: MIAMI, FL 33132

Title: DT ( ) Delete  
Name: AMINOV, GEORGE  
Address: 55 NE 1ST ST SUITE 12  
City-St-Zip: MIAMI, FL 33132

Title: DS ( ) Delete  
Name: AMINOV, MANI  
Address: 55 NE 1ST ST SUITE 12  
City-St-Zip: MIAMI, FL 33132

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: AMINOV, ABRAM  
Address: 26 NE 1ST ST  
City-St-Zip: MIAMI, FL 33132

Title: DT (X) Change ( ) Addition  
Name: AMINOV, GEORGE  
Address: 26 NE 1ST ST  
City-St-Zip: MIAMI, FL 33132

Title: DS (X) Change ( ) Addition  
Name: AMINOV, MANI  
Address: 26 NE 1ST ST  
City-St-Zip: MIAMI, FL 33132

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ABRAM AMINOV

DP

08/20/2009

Electronic Signature of Signing Officer or Director

Date