2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 434071 Jan 22, 2007 08:00 AM **Secretary of State** G-A BUILDING CORPORATION Principal Place of Business Mailing Address 1230 80TH ST SOUTH ST PETERSBURG FL 33707 1230 80TH ST SOUTH ST PETERSBURG FL 33707 2. Principal Place of Business - No P.O Box # 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Numbor Applied For 59-1482055 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent EINSTEIN, JOEL Street Address (P.O. Box Number is Not Acceptable) 1230-80TH ST SO ST PETERSBURG FL 33707 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tille i applicable (NOTE: Registered Agent signifiere required when reinstaling) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. mr ши ☐ Delete EINSTEIN, JOEL NAME NAMI 1230-80TH ST SO STREET ADDRESS STREET LADDIESS ST PETERSBURG FL 33707 CITY-ST-/IP CITY+ST-ZIP HILL ☐ Delete Change Addition EINSTEIN, FLORENCE 1230-80TH ST SO STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33707 CHY-St-ZIP CITY-ST-ZIP TIFLE Delete 1000 Change Addition NAME ΝΛΜ STREET ADDRESS STREET ADDRESS C1TY-S1-719 CHY-S1-ZIP Delete [[3]] ☐ Change Addition NAME NAM STREET ADDRESS STREET ADDRESS CHY-SI-7/P CHY-SL-7P THE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CHY-SI-7P TITLE Delete THE Change ■ Addition NAME NAME STREET ADDRESS SIREF LADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 eath; 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.

SUC EINE TUEL EL VINSTEIN PARS
COGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED