## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

471303

(8)

DOCUMENT #

1. Corporation Name

GF APARTMENTS, INC.

Principal Place of Business Mailing Address										ISIN DIDIO PIDIO BADIN I	IIDII OIDII EIOII EEOI	
1026 EUCLID AVE MIAMI BEACH FL 33139 US					% LEON MAYA 7300 WAYNE AVE #309 MIAMI BEACH FL 33141							
					US				3. Date Incorporated or Qualified 3a. Date of Last Report 03/05/1975 03/02/1995			
	Principal Place of Business			⊢—	2a. Mailing Address			THE RESIDENCE OF THE RESIDENCE OF THE	4. FEI Number 59-1662328		Applied For Not Applicable	
21	Suite, Apt. #, etc.			20	Suite, Apt. #, etc.					\$8	75 Additional	
22	<b>-</b>			27					5. Certificate of Status Desired	T	ee Required	
23	City & State			28	City & State				Election Campaign Financing     Trust Fund Contribution		.00 May Be	
	Zip Country				Zip Country				8. This corporation has liah it for intago ele tax 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 Registered Agent												
							81	Name				
MAYA, LEON 7300 WAYNE AVENUE, APT. #309							82	Street Add	dress (P.O. Box Number is Not Acceptable)			
MIAMI BEACH FL 33141							83					
							84	City		<b>9-1</b> 85	Zip Code	
							•	Oity		FL  °°	21p 0000	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when reinstating).  DATE												
12. OFFICERS AND DIRECTORS 13							, r.ugr.:	i ognotore respan	ADDITIONS/CHANGES TO OFFIC		CTORS IN 12	
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	(-ST-ZIP L do hereby			lied with this	filing is voluntarily fu			iT-ZIP s not qualify	for the exemption stated in Section 119.0	07(3)(k', Florida St	atutes. I further	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or truslee empowered to execute this report as required by Chapter 607, Florida S atutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address and the supplemental and the supplemental annual report is true and execute this report as required by Chapter 607, Florida S atutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address and the supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under any 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 truslee empowered to execute this report as required by Chapter 607, Florida S atutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address and the supplemental annual report is true and charged and the supplemental annual report is true 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 the corporation of the

SIGNATURE: