

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 850201 (5)

1. Corporation Name

GMD PROPERTIES-SALISBURY, INC.



Principal Place of Business

Mailing Address

1221 BRICKELL AVE.
SUITE 1800
MIAMI FL 33131

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SUITE 1800
MIAMI FL 33131

3. Date Incorporated or Qualified 08/31/1981	3a. Date of Last Report 10/17/1995
4. FEI Number 52-1152760	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 2875 N.E. 191 ST ST Suite, Apt. #, etc. 22 805 City & State 23 MIAMI, FL Zip 24 33180 Country 25 USA	2a. Mailing Address 26 2875 N.E. 191 ST ST Suite, Apt. #, etc. 27 # 805 City & State 28 MIAMI, FL Zip 29 33180 Country 30 USA
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRENE, JEFFREY A.
1221 BRICKELL AVE.
SUITE 1800
MIAMI FL 33131

81 Name	82 Street Address (P.O. Box Number is Not Accepted)	83	84 City	85 Zip Code
	2875 N.E. 191 ST ST # 805		MIAMI FL	33180

11. Pursuant to the provisions of Sections 607.0508 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

(If not, Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	P GRENE, JEFFREY A. 3808 N.E. 209 TERR. MIAMI FL 33180
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1996	
1.1 TITLE	Y.P. SEC. V PRES.
1.2 NAME	TINA GRENE
1.3 STREET ADDRESS	3808 N.E. 209 TH TERR
1.4 CITY - ST - ZIP	MIAMI, FL. 33180
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied in 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/11/96 987-5152

CR2E034 (3/96)