2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2008 08:00 AN Secretary of State

DOCU 1. Entity Nam G. B. M.,				•	Secretary of Sta
Principal Place 620 HUNT C APOPKA, FL	LUB BLVD	tailing Address 620 HUNT CLUB BLVD APOPKA, FL 32703			
DO NOT WRITE IN THIS SPAC				04202008 4. FEI Number 59-2054	
2471 JENI ALTAMON	GERARDO JR NIFER HOPE BLVD. NTE SPRINGS, FL OD, FL 32779		DO NOT WRITE IN THIS SPACE		
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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Fina Trust Fund Contribution.		.00 May Be ed to Fees	
10. IFILE NAME STREET ADDRESS GITY-ST-ZIP	OFFICERS AND DIRE PD MENDEZ, GERARDO 2471 JENNIFER HOPE BLVD. LONGWOOD, FL	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MENDEZ, BARBARA				U00000916526 05/13/08-80005-009 150.00
NAME STREET ADDRESS CITY-ST-ZIP			<u> </u>	=	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP				IN I	HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		•	
NAME STREET ADDRESS CITY-ST-ZIP				Ass (Ass	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachorient with an address, with all other like empowered.					

x2400 MENON JO Pue 4/20/08 407-785-0491