

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

**Jan 27 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F67664 (5)

1. Corporation Name
G M E CORPORATION



Principal Place of Business 1869 NW 97TH AVENUE BOX 621 MIAMI FL 33172	Mailing Address 1869 NW 97TH AVENUE BOX 621 MIAMI FL 33172
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country
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3. Date Incorporated or Qualified 02/10/1982	4. FEI Number 59-2167212	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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

8. Name and Address of Current Registered Agent

**MENDIGUTIA, FERNANDO C
1525 SW 18 STREET
SUITE 10, BOX 621
MIAMI FL 33145**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PDT	<input checked="" type="checkbox"/> DELETE
NAME	MORALES, CONSUELO M.	
STREET ADDRESS	1375 NW 97TH AVENUE, SUITE 10, #621	
CITY-ST-ZIP	MIAMI FL 33172-2855	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	MORALES, JUAN PABLO	
STREET ADDRESS	1375 SW 97TH AVENUE, SUITE 10, #621	
CITY-ST-ZIP	MIAMI FL 33172-2855	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MORALES, GUILLERMO	
STREET ADDRESS	1375 NW 97TH AVENUE, SUITE 10, #621	
CITY-ST-ZIP	MIAMI FL 33172-2855	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PDT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MORALES, CONSUELO M.	
1.3 STREET ADDRESS	1869 N.W. 97 AV. SUITE 10, #621	
1.4 CITY-ST-ZIP	MIAMI, FL 33172-2855	
2.1 TITLE	VSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MORALES, JUAN PABLO	
2.3 STREET ADDRESS	1869 N.W. 97 AV. SUITE 10, #621	
2.4 CITY-ST-ZIP	MIAMI, FL 33172-2855	
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	MORALES, GUILLERMO	
3.3 STREET ADDRESS	1869 N.W. 97 AV. SUITE 10, #621	
3.4 CITY-ST-ZIP	MIAMI, FL 33172-2855	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	100002413390	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	-01/27/98--01080--006	
6.3 STREET ADDRESS	***150.00	
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 1/27/98 (30) 710-7378

CR2E034 (10/97)