

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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***200.00 ***200.00

DO NOT WRITE IN THIS SPACE.

CORPORATION ANNUAL REPORT 1995
FLORIDA DEPARTMENT OF STATE
Sandra B. Montnam
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # F91109 (1)
1. Corporation Name
G.G. MANAGEMENT, INC.

Principal Place of Business Mailing Address
2975 MEADOW LANE 2975 MEADOW LANE
FT. LAUDERDALE FL 33331 FT. LAUDERDALE FL 33331

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28
Zip Country Zip Country
24 25 29 30

3. Date incorporated or Qualified 3a. Date of Last Report
07/19/1982 02/17/1994
4. FEI Number Applied For
59-2224296 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
GERSHAW, CHARLOTTE
2975 MEADOW LANE
FT. LAUDERDALE FL 33331

10. Name and Address of New Registered Agent
81 Name
GERALD GERSHAW
82 Street Address (P.O. Box Number is Not Acceptable)
2975 MEADOW LANE
83
84 City
FT. LAUDERDALE FL 85 Zip Code
33331

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: GERALD GERSHAW DATE: 2/28/95
Signature, typed or printed name of registered agent and (to 4 applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLUMENSTYK, LARRY	1.2 NAME	NANCY SCIARRILLO
STREET ADDRESS	60 WASHINGTON ST	1.3 STREET ADDRESS	128 MOUNT PLEASANT DR
CITY-ST-ZIP	MORRISTOWN NJ	1.4 CITY-ST-ZIP	EAST HANOVER, NJ 07936
TITLE	DVS	2.1 TITLE	DVS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERSHAW, CHARLOTTE	2.2 NAME	RONALD SPATZ
STREET ADDRESS	2975 MEADOW LANE	2.3 STREET ADDRESS	10304 N.W. 5 ST.
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	Plantation, FL 33324
TITLE	PDT	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERSHAW, GERALD	3.2 NAME	
STREET ADDRESS	2975 MEADOW LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 or in an attachment with an address.

SIGNATURE: GERALD GERSHAW PDT 2/11/95 308-389-5534
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR