FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00						
PROFIT • CORPORATION ANNUAL REPORT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State				
			CORPORATIONS			
1. Corporation		0005062 (3)			
GHG	FOWLER, INC.			A NARANA ANA KUNA KUNA KANAN ANAN ANAN ANAN A	anda akish shar ta ni	
Dringing Diggs	of Dusingers					
Principal Place of Business Mailing Address 313 CONGRESS ST. 313 CONGRESS ST. BOSTON MA 02210 BOSTON MA 02210						
				3. Date incorporated or Qualified 3a. Date of Last R 10/18/1995	eport	
2. Principal Place of Business 21		28. Mailing Address 26			Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>	5. Certificate of Status Desired 38.75	Additional Required	
City & State 23		City & State		6. Election Campaign Financing \$5.0	O May Be d to Fees	
Zıp 24	Country 25	Zip 29	Country	B. This corporation has liability for intangible tax under s Florida Statutes Yes No		
	9. Name and Address of Curren	t Registered Agent	61 Nar	10. Name and Address of New Registered Agent	·····	
ATTAWAY, JOHN A ESO.				Address (P.O. Box Number is Not Acceptable)		
% Lane, Trohn, Clarke, Bertrand, et al One lake morton dr.			83	83		
LAKEL	AND FL 33802-0003		84 City	 85 ℤ ^ι	p Code	
11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida Statuti	es, the above-named			
	ed agent, or both, in the State of Florid h, and accept the obligations of, Sections of the section of the sect	a. Suco chando was a imonz	eo ny the comoratior	board of directors. I hereby accept the appointment as registered	agent. I am	
	Signature, typed or printee name of registered agent i		TE: Registereo Agent signat.			
12. TITLE	OFFICERS AND		13. 1. 1 TILE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	5E034 (12/95)	
NAME	PLONSKIER, MARC S 313 CONTRESS ST.		1.2 NAME		34 ()	
STREET ADDRESS	BOSTON MA 02210		1.3 STREET ADDRES		LEC .	
CITY-ST-ZIP TITLE	DY	DELETE	1.4 CITY-ST-ZIP 2. 1 TITLE	Change	Addition	
NAME	CANEPARI, DAVID J 313 CONGRESS ST.		2.2 NAME			
STREET ADDRESS	BOSTON MA 02210		2.3 STREET ADDRES			
CITY-ST-ZIP TITLE	T	DELETE	2.4 City-St-ZiP 3.1 Tille	Change	Addition	
NAME	DONOVAN, TIMOTHY M 313 CONGRESS ST.		3.2 NAME		koose a second	
STREET ADDRESS CITY - ST - ZIP	BOSTON MA 02210		3.3 STREET ADDRES			
TITLE		DELETE	3.4 CITY-S1-Z:P 4. 1 TITLE	Change	Addition	
NAME			4.2 NAME			
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRES	700001839487		
TITLE		DELETE	4.4 CHTY - ST - ZIP 5. 1 TITLE	-0572479601110052Channe	Addition	
NAME			5.2 NAME	***225.00		
STREET ADDRESS			5.3 STREET ADDRES			
CITY-ST-ZIP TITLE			5.4 City - St- 2iP 6. 1 Title	- Change	- Addition	
NAME			6.2 NAME	~ (J+C	26	
STREET ADDRESS CITY-S1-ZIP			6.3 STREET ADDRES	SALe		
	r certify that the information supplied w	ith this filing is voluntarily fur-	54 CITY-ST-ZIP	ty for the exemption stated in Section 119.07(3)(k), Florida Statuti	es. I further	
14. I do hereby certify that the information supplied with this filing is voluntarily turnshed and boes not quality 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 legiturified as if made under certify that I am an officer or director of the corporation or the receiver or trustee environmental 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: Timothy M. Donovan Signature of signing officer of Director (617) 345-9300						