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

Aug 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # G39921 (3) G.M.C., INC. Principal Place of Business Mailing Address % AMERICAN INFO. SERVICES % AMERICAN INFO. SERVICES ONE S.E. 3RD AVE., 28TH FL ONE S.E. 3RD AVE., 28TH FL DO NOT WRITE IN THIS SPACE MIAMI FL 33131 **MIAMI FL 33131** 3. Date Incorporated or Qualified 05/20/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 98-0074961 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 AMERICAN INFORMATION SERVICES, INC. ONE S.E. 3RD AVE., 28TH FL 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33131** 83 84 City Zip Code 85 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 edget, 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. Au6 6, 1998 SIGNATURE of recreated agent and tile if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition □ DELETE Change TITLE 1.1 TITLE LAWRENCE, R J 1.2 NAME NAME CR2E034 4-FIRST CANADIAN PL 5000 70 YORK ST; STE 1500 STREET ADDRESS 1.3 STREET ADDRESS TORONTO, ONTARIO CITY-ST-ZIP 1.4 CITY-ST-ZIP TORONTO, DNIARIO, MSJ1 Change DELETE Addition 2.1 WILE TITLE KNOWLES, HENRY J NAME 2.2 NAME 6 DOON RD. STREET ADDRESS 2.3 STREE1 ADDRESS WILLOWDALE, ONTARIO CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TIFLE LAWRENCE, JANICE 3.2 NAME NAME 2 CLUNY DRIVE STREET ADDRESS 3.3 STREET ADDRESS TORONTO, ONTARIO 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ___ Addition LAWRENCE, JANICE 4 2 NAME NAME 2 CLUNY DRIVE 4.3 STREET ADDRESS STREET ADDRESS TORONTO, ONTARIO 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 THLE TITLE RAATTAMA, HENRY H JR NAME 5.2 NAME ONE S.E. 3RD AVE., 28TH FL STREET ADDRESS 5.3 STREET ADDRESS **MIAMI FL 33131** CITY-ST-ZIP 5.4 CITY - S1 - ZIP ___ Addition □ DFLFTE Change THIE 6.1 TITLE NAME 6.2 NAME 63 STREET ADDRESS STREET ADDRESS

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 confortion or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

CHTY-ST-ZIP

Block 12 or Block 13 if charled do on an attachment with an address

FILED