

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # K12987**

1. Entity Name  
**G. G. ENTERPRISES OF SOUTH FLORIDA, INC.**



Principal Place of Business  
**4000 N 51 AVE  
HOLLYWOOD, FL 33021**

Mailing Address  
**4000 N 51 AVE  
HOLLYWOOD, FL 33021**



01142008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0027215**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**GINSBURG, JANICE  
4000 N 51 AVE  
HOLLYWOOD, FL 33021**

**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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U000000788740  
01/18/08-80055-001 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	GINSBURG, GARY
STREET ADDRESS	4000 N 51 AVE
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	SD
NAME	GINSBURG, JANICE
STREET ADDRESS	4000 N 51 AVE
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 attachment with an address, with all other like empowered.

**SIGNATURE:**

*Janice Ginsburg, Janice Ginsburg* 1-15-08 (954) 962-1318

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #