FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -8 AM 8:37

DOCUMENT # K60206 (5)

1. Corporation Name
GMG, INC.

Principal Place of Business	Mailing Address
175B U.S. 1, STE 278 TEQUESTA FL 33469-9727	175B U.S. 1, STE 278 TEQUESTA FL 33469-9727

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/23/1989
3a. Date of Last Report: 02/02/1994

2. Principal Place of Business	2a. Mailing Address
21 150 U.S. ONE Suite 20	26 177 U.S. ONE
Suite, Apt. #, etc. 22 SUITE 20	Suite, Apt. #, etc. 27 SUITE 278
City & State 23 TEQUESTA FL	City & State 28 TEQUESTA FL
24 Zip 33469 25 Country PALM BEACH	29 Zip 33469 30 Country PALM BEACH

4. FEI Number: 59-2952969 ☐ Applied For ☐ 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

SELDIN, KEITH A.
1155 U.S. HIGHWAY ONE
SUITE 205
JUNO BEACH FL 33408

10. Name and Address of New Registered Agent

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

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: Stephen Guinan STEPHEN GUINAN DATE: 1/25/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	GUINAN, STEPHEN J.	12 NAME	
STREET ADDRESS	150 US HWY. ONE	13 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA FL	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	GUINAN, GAIL-MARIE	22 NAME	
STREET ADDRESS	150 US HWY. ONE	23 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA FL	24 CITY-ST-ZIP	
TITLE	OFFICER-SEC.	31 TITLE	☐ Change ☐ Addition
NAME	GUINAN, BRIAN	32 NAME	
STREET ADDRESS	150 U.S. ONE	33 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA FL 33469	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Stephen J. Guinan 1/25/95 407-746-1400
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER Date Daytime Phone #
STEPHEN V. GUINAN

0430134 FP