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

PROFIT CORPORATION ANNUAL REPORT

1997

G. B. OF AMERICA CORP.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K71721

(0)

FILED
May 07 1997 8:00am
Secretary of State

ncipal Place of Business	Mading Address	~

2. Principal Place of Business 2. Principal Place of Business 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		Suite, Apt. #, etc. 27 City & State	801 WEST 49TH ST SUITE 228 HIALEAH FL 33012-3581 2a. Mailing Address 26] 9954 NW. 32 ST Suite, Apt. #, etc. 27] City & State 28] MIDMI, FC Zip Country		3. Date Incorporated or Qualified 03/07/1989 4. FEI Number 65-0143670 5. Certificate of Status Desireo 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for in	\$8.7 Fee \$5.0 Add otangible tax under	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees ible tax under s. 199.032,	
24	25 9. Name and Address of Curr		30	1DE	Florida Statutes 10. Name and Address of New Reg	Yes 🔀 No		
11. Pursuant office or agent. I s	to the provisions of Sections 607 0 registered agent, or both, in the Stram familiar with, and accopt the ob-	1 228 502 and 607.1508, Florida Statute ate of Florida Such change was an	82 83 84 85, the above ulhorized by rida Statutes	City - named cor the corpora	poration submits this statement for the pation's board of directors. I hereby accep	FL 85 Z	Prp Code ng its registered as registered	
SIGNATURE	Signature, typed or printed name of registered	· · · · · · · · · · · · · · · · · · ·		or signadule fequ	ired when renstating)	DAIL		
12.	OFFICERS A	AND DIRECTORS DEFIE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT		
NAME STREET ADDRESS CITY-ST-ZIP	GOMEZ, FERNANDO 801 W. 49TH STREET, #226 HIALEAH FL 33012		1.2 NAME 1.3 STREET 1.4 CITY - S					
NAME STREET ADDRESS CITY-ST-ZIP	GOMEZ JR., FERNANDO 801 W. 49TH STREET, #226 HIALEAH FL 33012	□ DLLETE	2.1 TITLE 2.2 NAME 2.3 STRCE: 2.4 CHY-8			∟_ Chari	ge [_] Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP		□ ULLETE	3.1 TITLE 3.2 NAME 3.3 STHEE? 3.4. City - S	ADDRESS		Chan	ge Addition	
TITLE NAME STREET ADDRESS		DELETE	4 1 TITLE 4 2 NAME 4 3 STREET	AUDRESS	10.110	Chan	ge 🔝 Addition	
TITLE NAME STREET ADDRESS		□ DETETE	5 1 TITLE 5 2 NAME 5 3 STREET	ADDRESS	17 T T T T T T T T T T T T T T T T T T T	Chan	ge Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	5.4 CITY-S 61 THLE 62 NAME 63 STREET	ADDRESS		Chan	ge Addition	
CITY-ST-ZIP			6.4 CITY - S	1 - 710				

I do 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 logal 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 changes, or on an all achieve the analysis.

CIGNATUDE:

4.22-9

(2N) 822, UZ99