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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

L2695

(6)

G. I. GROUND U.S., INC.

Mar 18 1998 8:00am Secretary of State

					a n a nda a ndi andi a ndi ila
Principal Place	e of Business	Mailing Address			##
8640 SEMINO	OLE BLVD	58 KEYSTONE AVENUE			
SEMINOLE F		TORONTO ON M4C1H			
US		US		DO NOT WRITE IN THIS	S SPACE
				3. Date Incorporated or Qualified 10/31/1989	İ
2. Principal P	lace of Business	2a. Mailing Address		4, FEI Number	Applied For
21		26		98-0105771	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	 This corporation owes or has paid the corporation of the personal Property Tax due June 30. 	urrent year Intangible
	g, Name and Address of Curren		[30]	10. Name and Address of New Registered	
HOFSTRA, PETER T. 81 Name					
8640 SEMINOLE BLVD			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
SEMINOLE FL 34642			Street Add		
1			B3		
			84 City		85 Zip Code
			1 1	FI	_ '
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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature typed or printed name of registrated agent and take if applicable. INCITE Registered Agent signature required when reinstalling) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	VPD	☐ DELETE	1.1 TITLE	Nooth State To office to All	Change Addition
NAME	GROUND, VERONICA		1.2 NAME		
STREET ADDRESS	58 KEYSTONE AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	TORONTO ONTARIO CANAD		1.4 CHY-ST-ZIP		
TITLE	SD	☐ DELETE	2.1 THLE		Change Addition
NAME	GROUND, VERONICA		2.2 NAME		
STREET ADDRESS	58 KEYSTONE AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	TORONTO ONTARIO CANAD	DELETE	2 4 CITY-ST-ZIP		
NAME			3.1 TITLE	b	☐ Change ☐ Addition
STREET ADORESS			3 2 NAME]
CITY-ST-ZIP			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		j
TITLE	***************************************	DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		El charge El manten
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		L_ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		ļ
CITY-ST-ZIP			6.4 CITY-SY-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 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.

CIGNATURE.

Menousa Branna

Tel 18 1998

416/691-5247

R2E034 (10/97)