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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # L88732

(7)

G & G(434)INVESTMENTS, INC.

| G & G(404)/144 COTTAILER OF THO  |   |   |  |   |   |
|--|---|---|--|---|---|
| Principal Place of Bu  | usiness   | Mailing Address   |  |   | ile tilds dillet millit lestic biblis actes minte cha   |
| 851 STATE ROAD 434. SUITE 192 1601 E. AMELIA STF<br>LONGWOOD FL 32750 ORLANDO FL 32803   |   |   | !  |   |   |
|  |   | US  |  | 3. Date Incorporated or Qualified 07/19/1990  | 3a. Date of Lest Report<br>05/01/1995   |
| 2. Principal Place o   | of Business   | 2a. Mailing Address   |  | 4. FEI Number 59-3021309  | Applied For Not Applicable  |
| 1  |   | Suite, Apt. #, etc.   |  |   | \$8.75 Additional   |
| Suite, Apt. #, etc   | ٠.  | 27  |  | 5. Certificate of Status Desired  | Fee Required  |
| City & State   |   | City & State  |  | 6. Election Campaign Financing  | \$5.00 May Be   |
| <u>.</u>   |   | 28  |  | Trust Fund Contribution   | Added to rees   |
| Zip  | Country   | Ziρ   | Country  | B. This corporation has liability for i<br>Florida Statutes ☐ Yes                     | ntangible tax under s. 199.032,   |
| <u> </u>   | 25<br>Name and Address of Cur   | 29  | 30   | 10. Name and Address of New R   |   |
| 9.   | . Hame and Address of Our   | Tont Hogistore Figure   | 81 Name  |   |   |
| 01110011   | DODERT I  |   | 82 Street Add  | ress (P.O. Box Number is Not Acceptab   | ole)  |
| 1501 THE   | ROBERT J.   |   | 51 Street Add  | Tess (F.O. Dox Humbor 15 Not Hoophas  |   |
| MAITLAND   |   |   | 83   |   | <del></del> '   |
| MAHEAND  | 1 6 06/01   |   | 84 City  |   | 85 Zip Code   |
|  |   |   |  | oration submits this statement for the pured of directors. I hereby accept the appli- | FL     '  |
|  | nd accept the obligations of, S   | Section 607.0505, Florida Statuti   |  |   |   |
| familiar with, ar<br>SIGNATURE Signar  | nd accept the obligations of, sometimes, types or printed name of registered a  | agent and tills if applicable.  | NOTE: Registered Agent signature require   | od when renstating)  ADDITIONS/CHANGES TO OFF   | DATE<br>ICERS AND DIRECTORS IN 12   |
| familiar with, ar<br>SIGNATURE Signar  | nd accept the obligations of, so<br>ours, typica or printed name of registered<br>OFFICERS  | Section 607.0505, Florida Statut  |  | od when renstating)<br>ADDITIONS/CHANGES TO OFF                                       | ICERS AND DIRECTORS IN 12   |
| familiar with, ar SIGNATURE Stigna  12.  | nd accept the obligations of, so<br>u.e., typed or printed name of registered of<br>OFFICERS  | agent and tilk if a splicacie.  AND DIRECTORS                               | NOTE: Registered Agent signature require   | od when reinstating)<br>ADDITIONS/CHANGES TO OFF                                      | ICERS AND DIRECTORS IN 12   |
| familiar with, ar SIGNATURE SIGNATURE SIGNATURE AND SIGNATURE  | nd accept the obligations of, so we, typed or printed name of registered a OFFICERS  D  GAMSON, ROBERT J.   | agent and tile if a policació.  AND DIRECTORS                               | NOTE: Registered Agent signature require  13.  1, 1 TITLE  | od when renstating)  ADDITIONS/CHANGES TO OFF   | ICERS AND DIRECTORS IN 12   |
| familiar with, ar SIGNATURE Signa  12.  TILLE STREET ADDRESS   | nd accept the obligations of, so<br>u.e., typed or printed name of registered of<br>OFFICERS  | egent and tile if a policació.  AND DIRECTORS  DELETE                       | NOTE: Registered Agent signature requir  13.  1.1 TITLE  1.2 NAME  1.3 STREEF ADDRESS  1.4 CITY-ST-ZIP   | od when renstating)<br>ADDITIONS/CHANGES TO OFF                                       | ICERS AND DIRECTORS IN 12  Change Addition  |
| familiar with, ar SIGNATURE Signa  12.  ITLE JAME STREET ADDRESS SILY-ST-2IP   | or printed name of registored of the common | agent and tile if a policació.  AND DIRECTORS                               | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 + TITLE  | od when renstating) ADDITIONS/CHANGES TO OFF  | ICERS AND DIRECTORS IN 12  Change Addition  |
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D TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

4/19/96

(407) 251-6825

Daytime Phone #