

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M08908

Entity Name: G-M FOODS, INC.

FILED
Jan 29, 2003
Secretary of State

Current Principal Place of Business:

8390 N.W. 53RD STREET, SUITE 314
MIAMI, FL 33166

Current Mailing Address:

8390 N.W. 53RD STREET, SUITE 314
MIAMI, FL 33166

New Principal Place of Business:

9100 S DADELAND BLVD
SUITE 1412
MIAMI, FL 33156

New Mailing Address:

9100 S DADELAND BLVD
SUITE 1412
MIAMI, FL 33156

FEI Number: 59-2474146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, HORACIO S.
6850 RIVIERA DR
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

GARCIA, HORACIO S
6850 RIVIERA DR
CORAL GABLES, FL 33146 US

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.

SIGNATURE: GARCIA, HORACIO

01/29/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: GARCIA, HORACIO S.,
Address: 6850 RIVIERA DR
City-St-Zip: CORAL GABLES, FL

Title: PD () Delete
Name: MEMENDEZ, PEDRO,
Address: 435 LEUCADENDRA DRIVE
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD (X) Change () Addition
Name: GARCIA, HORACIO S
Address: 6850 RIVIERA DR
City-St-Zip: CORAL GABLES, FL 33146

Title: PD (X) Change () Addition
Name: MENENDEZ, PEDRO
Address: 435 LEUCADENDRA DRIVE
City-St-Zip: CORAL GABLES, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MENENDEZ, PEDRO

PD

01/29/2003

Electronic Signature of Signing Officer or Director

Date