

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004125

FILED
Apr 18, 2006
Secretary of State

Entity Name: GMN ENTERPRISE COMMUNITIES, INC.

Current Principal Place of Business:

300 NW 12TH AVE
MIAMI, FL 33128 US

New Principal Place of Business:

Current Mailing Address:

300 NW 12TH AVE
MIAMI, FL 33128 US

New Mailing Address:

FEI Number: 59-3695272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTORANO, SAL
300 N.W. 12 AVENUE
MIAMI, FL 33128 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DOMINGUEZ, AGUSTIN
Address: 300 NW 12TH AVENUE
City-St-Zip: MIAMI, FL 33128

Title: VPD () Delete
Name: REVALES, RONALD E
Address: 300 NW 12TH AVENUE
City-St-Zip: MIAMI, FL 33128

Title: VPTD () Delete
Name: MARTORANO, SALVATORE
Address: 300 NW 12TH AVENUE
City-St-Zip: MIAMI, FL 33128

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: REVALES, RON
Address: 300 NW 12TH AVENUE
City-St-Zip: MIAMI, FL 33128

Title: VPTD (X) Change () Addition
Name: MARTORANO, SAL
Address: 300 NW 12TH AVENUE
City-St-Zip: MIAMI, FL 33128

Title: S () Change (X) Addition
Name: RODRIGUEZ, KATHY
Address: 300 NW 12 AVENUE
City-St-Zip: MIAMI, FL 33128

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAL MARTORANO

RA

04/18/2006

Electronic Signature of Signing Officer or Director

Date