2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2004 8:00 am Secretary of State

DOCUMENT # P0000022514 1. Entity Name G & C WASHINGTON ENTERPRISES, INC.					04-26-2004 91011 038 ***150.00			
Principal Place of Business Mailing Address				1	İ			
11201 OVERSEAS HIGHWAY MARATHON, FL 33050		11201 OVERSEAS HIGHWAY MARATHON, FL 33050						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04192004	Chg-P	CR2E034 (10/03)	
City & State		City & State		4. FEI Number 65-10540)34)	oplied For ot Applicable	
Zip	Country	Zip	Coun		5. Certificate of		S8.75 Add Fee Require	
6. Name and Address of Current Registered Agent Name Name								
	AY JAMES A ARD COURT 33143	Street Address (P.O. Box Number is Not Acceptable) 5701 Street Address (P.O. Box Number is Not Acceptable) 5701						
WIAIWA, FE 33 FE3				Suite 12				
				City Marathon FL 33357				
8. The above named entity sobmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. William N. Devancite.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NATE: Registered Agent signature required when reinstatung) DATE								
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.								
.10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CH	HANGES TO OFFI	CERS AND DIRECTOR	S IN 11
TITLE .	PTD	☐ Delete	TITLE				☐ Change	☐ Addition
NAME, STREET ADDRESS	WASHINGTON; GARY 11201 OVERSEAS HIGHWAY		NAM STRE	E ET ADDRESS				
CITY-ST-ZIP	The state of the s			-ST-ZIP				
TITLE NAME	SVD WASHINGTON CLAIRE C	☐ Delete	TITLE	-			` Change	Addition
STREET ADDRESS	11201 OVERSEAS HIGHWAY			ET ADDRESS				
CITY-ST-ZIP	MARATHON, FL 33050		CITY	-ST-ZIP				
TITLE		☐ Delete	TITLE	[7]			☐ Change	Addition
STREET ADDRESS			- NAM	E	Ke Gra	awell.	+ Ocean	
CITY-ST-ZIP				-ST-ZIP	ARATH	on. Fl	et Ocean 33050	
TITLE -	·	☐ Delete	TITLE	l l		_ , , <u>_</u>	☐ Change	Addition
NAME			NAM	1				
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS - ST-ZIP				
TITLE		☐ Delete	TITLE			,	☐ Change	Addition
NAME			NAM				0.12.1gu	
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			_	-ST-ZIP				
TITLE NAME		☐ Delete	TITLE		•		☐ Change	☐ Addition
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP				-ST-ZIP				
12. 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 report or supplemental 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 10 or Block 11 if								

305-743-6565