

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 01, 2001 08:00 AM
Secretary of State

DOCUMENT # P00000084355

1. Entity Name
G.D. BROKER, INC.

Principal Place of Business
 8518 SW 8TH STREET
 MIAMI FL 33144

Mailing Address
 8518 SW 8TH STREET
 MIAMI FL 33144

2. Principal Place of Business
 9745 SUNSET DRIVE

3. Mailing Address
 9745 SUNSET DRIVE

Suite, Apt. #, etc.
 SUITE 114 B

Suite, Apt. #, etc.
 114 B

City & State
 MIAMI FL

City & State
 MIAMI FL

Zip
 33173

Country

Zip
 33173

Country

4. FEI Number
65-1038056

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DIAZ HERNAN G
8190 SW 158TH PLACE
 MIAMI FL 33193
 US

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____
 Signature, typed or printed name of registered agent and title if applicable.

02/01/2001
 DATE

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SD Delete
 NAME GUTIERREZ RAUL
 STREET ADDRESS 8190 SW 158TH PLACE
 CITY-ST-ZIP MIAMI FL 33193

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE PD Delete
 NAME DONADA JOSE LUIS
 STREET ADDRESS 8518 S.W. 8TH STREET
 CITY-ST-ZIP MIAMI FL 33144

TITLE PD Change Addition
 NAME DIAZ HERNAN G
 STREET ADDRESS 8190 S.W. 158TH PL
 CITY-ST-ZIP MIAMI FL 33193

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 STREET ADDRESS
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TITLE Change Addition
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERNAN GUSTAVO DIAZ
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PD 02/01/2001
 Date

Daytime Phone #

CR2E034 (11/00)