2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 21, 2005 08:00 AM Secretary of State **DOCUMENT # P00000084774** 1. Entity Name G.G.A. BUILDING, INC. Mailing Address Principal Place of Business C/O GUSPAV REALTY INC C/O GUSPAV REALTY INC 1646 SE 3RD COURT 1646 SE 3RD COURT DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 CR2E034 (10/03) 04182005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1058695 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ZIMMERMAN, STPEHEN L DO NOT WRITE 737 E ATLANTIC BLVD POMPANO BEACH, FL 33060 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 1/00000321875 9. Election Campaign Financing \$5.00 May Be 04/21/05-80094-024 150.00 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME PAVONE, JULIO 1646 SE 3COURT STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH, FL 33441 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes 1 further certify that the Information indicated on this report or supplemental peopt is true and accurate and that my signature shall have the same logal effect as if made under oath, that I am an officer or director of the corporation of the receiver or trustice empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

CITY-ST-ZIP

TITLE
NAME
STREEI ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

GIUGO PAYONE

DILECTOR

04/18/05

FILED

954-424-0522

Daytime Phone if