2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nam GPA PRO	MENT # PERTIES, INC.		010931	,				ARTON OF COMPORATION	
Principal Plac	e of Business		Mailing Address				02 F	FEB 18 PM 4:38	
Principal Place of Business Mailing Address 9400 SOUTH DADELAND BLVD PH-3 9400 SOUTH DADELAND BLVD PH-3 MIAMI FL 33156 MIAMI FL 33156					43				
2. Principal P	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			• • • •	DO NOT WRITE IN THIS SPACE		
City & State			City & State			4.	FEI Number	Applied For	
Zip Country			Zip Counti		ntry	5.	Certificate of Status Desired	Not Applicab	
	6 Name and Ad	dress of Current Re	nistered Agent				Name and Address of New	Fee Required	
	o. Name and Ad	arasa di Cultelli Rej	Arreien Waerk		Name .				
_ABRAMS,	DAVID S ESQ					TELI.	PE ACUI		
9400 SOU	JTH DADELÂND BL	.VD PH-3			Sileer Ac	duress (F.O.	BOX NUMBER IS NOT Acceptable		
MIAMI FL	33156				9400	Sour	Y DADELAND &	BLVD. PH-3	
					City		·	FL Zip Code 33/56	
						IAMI			
8. The above	named entity submit	s this statement for the	e purpose of changing it	is register	ea office or	registered aq	gent, or both, in the State of Fl	iorida.	
01011171105		///	FEL IE	ر م س <u>ح</u>	AGNIA	P V	جرا	1/30/02	
SIGNATURE _	Signature, typed or printed p	egistered agent and	Title il applicable. (NC	TE: Registere	ed Agent signatu	re required when i	reinstaling)	DATE	
Tax filing requirement and elects to do so After May 1, 20					!!! FEE IS \$150.00 002 Fee will be \$550.00 ble to Department of Stat				
		ts to do so.	After May 1, 2	002 Fee	will be \$5	50.00	10. Election Campaign Fi Trust Fund Contribution		
(See criter		ts to do so.	After May 1, 2 Make Check Paya	002 Fee ble to D	will be \$5	50.00 of State	Trust Fund Contribution	on. Added to Fees	
(See criter	ria on back)	ts to do so.	After May 1, 2 Make Check Paya RECTORS	002 Fee	will be \$5 epartment	50.00 of State	Trust Fund Contribution		
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