

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010931

Entity Name: GPA PROPERTIES, INC.

FILED
Jan 06, 2005
Secretary of State

Current Principal Place of Business:

9400 SOUTH DADELAND BLVD PH-3
MIAMI, FL 33156

Current Mailing Address:

9400 SOUTH DADELAND BLVD PH-3
MIAMI, FL 33156

New Principal Place of Business:

814 PONCE DE LEON BLVD
310
CORAL GABLES, FL 33134

New Mailing Address:

814 PONCE DE LEON BLVD
310
CORAL GABLES, FL 33134

FEI Number: 65-1073781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUMA, JOHANNA
9400 SOUTH DADELAND BLVD
PH-3
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

GUMA, JOHANNA M P
814 PONCE DE LEON BLVD
310
CORAL GABLES, FL 33134 US

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: JOHANNA M. GUMA-AGUIAR

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GUMA, VIRGILIO
Address: 9400 SOUTH DADELAND BLVD PH-3
City-St-Zip: MIAMI, FL 33156

Title: P () Delete
Name: GUMA-AGUIAR, JOHANNA M
Address: 9400 SOUTH DADELAND BLVD PH-3
City-St-Zip: MIAMI, FL 33156

Title: V () Delete
Name: AGUIAR, FELIPE
Address: 9400 SOUTH DADELAND BLVD PH-3
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GUMA, VIRGILIO
Address: 814 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: P (X) Change () Addition
Name: GUMA-AGUIAR, JOHANNA M
Address: 814 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: V (X) Change () Addition
Name: AGUIAR, FELIPE
Address: 814 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHANNA M. GUMA-AGUIAR

P

01/06/2005

Electronic Signature of Signing Officer or Director

Date