

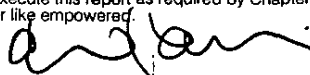


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90052 010 ***158.75

DOCUMENT # P02000014383 1. Entity Name G.C. ADMINISTRATION, INC.					
Principal Place of Business 14600 SW 136 STREET MIAMI, FL 33186				Mailing Address 111 SW 3RD STREET SIXTH FLOOR MIAMI, FL 33130	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		40040091 	
City & State Zip Country		City & State Zip Country		4. FEI Number 03-0395574	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent ELLIOT, HARRIS ESQ 111 SW 3RD STREET SIXTH FLOOR MIAMI, FL 33130				7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARCIA-CARRILLO, MICHAEL <input type="checkbox"/> Delete 14600 SW 136 STREET MIAMI, FL 33186				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD GARCIA-CARRILLO, PEDRO <input type="checkbox"/> Delete 14600 SW 136 STREET MIAMI, FL 33186				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CASTELLANOS, MICHELLE <input type="checkbox"/> Delete 14600 SW 136 STREET MIAMI, FL 33186				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HARRIS, ELLIOT <input type="checkbox"/> Delete 111 SW 3 STREET, 6TH FLOOR MIAMI, FL 33130				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Castellanos, Ray <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 14600 SW 136 Street Miami, Florida 33186				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATD Garcia-Carrillo, Pedro, Jr. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 14600 SW 136 Street Miami, Florida 33186				
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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Elliott Harris 				March 24, 2005 (305) 3580146	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>	