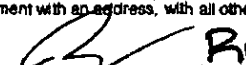


FILED
Jun 04, 2003 8:00 am
Secretary of State

05-05-2003 90353 028 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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DOCUMENT # P02000034130			
1. Entity Name GI-603 HOLDING COMPANY, INC.			
Principal Place of Business 601 BRICKELL KEY DIVE, SUITE 705 MIAMI, FL 33131		Mailing Address 601 BRICKELL KEY DIVE, SUITE 705 MIAMI, FL 33131	
2. Principal Place of Business 1000 Brickell Ave		3. Mailing Address 1000 Brickell Ave	
Suite, Apt. #, etc. 900		Suite, Apt. #, etc. 900	
City & State Miami, FL		City & State Miami, FL	
Zip 33131	Country US	Zip 33131	Country US
6. Name and Address of Current Registered Agent DE LA PENA & BAJANDAS, LLP 601 BRICKELL KEY DIVE, SUITE 705 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name Ricardo Bajandas, P.A. Street Address (P.O. Box Number is Not Acceptable) 1000 Brickell Ave, suite 900 City Miami, FL Zip Code 33131	
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  Ricardo Bajandas DATE 04/30/03 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning.)			
FILING FEE IS \$150.00. After May 1, 2003 Fee will be \$650.00. Make Check Payable to Florida Department of State.		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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:  Ricardo Bajandas, Sec.		DATE 04/30/03 805 377-0809	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Original Phone #	

CRREC034 (10/02)