## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P02000119041

1. Entity Name GMCR GROUP, INC.



**FILED** Mar 10, 2008 08:00 A Secretary of State

Principal Place of Business

901 BRICKELL KEY BLVD

#1908 MIAMI, FL 33131 Mailing Address

901 BRICKELL KEY BLVD

#1908

MIAMI, FL 33131



## DO NOT WRITE IN THIS SPACE

03062008

No Chg-P

CR2E034 (11/05)

4. FEI Number 37-1450628 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

6. Name and Address of Current Registered Agent

MARQUEZ, GONZALO 901 BRICKELL KEY BLVD #1908 MIAMI, FL 33131

DO NOT WRITE 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. 1 am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

000000852537 03/26/08-80027-016 150.00

10. OFFICERS AND DIRECTORS TITLE D NAME MARQUEZ, GONZALO STREET ADDRESS 901 BRICKELL KEY BLVD, APT 1908 CITY-ST-ZIP MIAMI, FL 33131 TITLE MARQUEZ, CRISTINA R NAME STREET ADDRESS 901 BRICKELL KEY BLVD, APT 1908 CITY-ST-ZIP MIAMI, FL 33131 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED RAME OF SIGNING OFFICER OR DIRECTOR

CRISTINA MARQUEZ -