

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2004 8:00 am
Secretary of State

02-19-2004 90010 019 ***150.00

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1. Entity Name
 G & P GENERAL BUSINESS, CORP.

Principal Place of Business
 20355 NE 34TH CT.
 APT. 2122
 AVENTURA, FL 33180

Mailing Address
 20355 NE 34TH CT.
 APT. 2122
 AVENTURA, FL 33180

54008232



2. Principal Place of Business

3215 NE 184 ST Ste 14302
 Suite, Apt. #, etc. Ste 14302

3. Mailing Address

3215 NE 184 ST Ste 14302
 Suite, Apt. #, etc. Ste 14302

02162004 Chg-P CR2E034 (10/03)

City & State
 Miami, FL
 Zip 33160 Country

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 Miami, FL
 Zip 33160 Country

4. FEI Number
 27-0061778 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BUSTOS, JOSE R
 20355 NE 34TH CT.
 APT. 2122
 AVENTURA, FL 33180

7. Name and Address of New Registered Agent

Name Jose R. Bustos
 Street Address (P.O. Box Numbers Not Acceptable)
 14302 NE 184 ST Ste 14302
 City Miami FL Zip Code 33160

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	BUSTOS, JOSE R	
STREET ADDRESS	20355 NE 34TH CT. APT. 2122	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ESCOBAR, GLORIA J	
STREET ADDRESS	20355 NE 34TH CT. APT. 2122	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jose R. Bustos	
STREET ADDRESS	14302 NE 184 ST Ste 14302	
CITY-ST-ZIP	Miami, FL 33160	
TITLE	Vicepresident	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	14302 NE 184 ST Ste 14302	
CITY-ST-ZIP	Miami, FL 33160	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #