

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000076481		
1. Entity Name G & G PRODUCTIONS & PROMOTIONS, INC.		
Principal Place of Business 1470 N.W. 196TH TERRACE MIAMI, FL 33169-3059	Mailing Address 1470 N.W. 196TH TERRACE MIAMI, FL 33169-3059	



02172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 05-0577527	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**RODRIGUEZ, MERCEDES G
1470 N.W. 196TH TERRACE
MIAMI, FL 33169-3059**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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	GONZALEZ, GASTON
NAME	SCALABRINI ORTIZ 3622 1A BS.AS
STREET ADDRESS	ARGENTINA, C.P. 1425,
CITY-ST-ZIP	
TITLE V	GONZALEZ, GUSTAVO G
NAME	SCALABRINI ORTIZ 3622 1A BS.AS
STREET ADDRESS	ARGENTINA, C.P. 1425,
CITY-ST-ZIP	
TITLE ST	RODRIGUEZ, MERCEDES G
NAME	1470 N.W. 196 TERRACE
STREET ADDRESS	MIAMI, FL 331693059
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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 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:

Mercedes G. Rodriguez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/07/05
Date

(305) 588-1437
Daytime Phone #