

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90163 041 ***150.00

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1. Entity Name
G.G.C., INC.

Principal Place of Business
7313 NW 61ST STEET
MIAMI, FL 33166 US

Mailing Address
7313 NW 61ST STREET
MIAMI, FL 33166 US

2. Principal Place of Business - No P.O. Box #
4511 SW 124 Terr.
Suite, Apt. #, etc.

3. Mailing Address
4511 SW 124 Terr.
Suite, Apt. #, etc.

40033334



04112007 Chg-P CR2E034 (12/06)

City & State
MIRAMAR FL
Zip 33027 Country USA

City & State
MIRAMAR FL
Zip 33027 Country USA

4. FEI Number
71-0963032
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GIRALDO, GILBERT
4512 SW 125TH TERRACE
MIRAMAR, FL 33027

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
4512 SW 124 Terr.
City MIRAMAR FL Zip Code 33027

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]

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

(NOTE: Registered Agent signature required when reappointing)

4-11-07

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE P
NAME GIRALDO, GILBERT
STREET ADDRESS 4512 SW 124TH TERRACE
CITY-ST-ZIP MIRAMAR, FL 33027 ☐ Delete

TITLE VP
NAME GIRALDO, FERNANDO
STREET ADDRESS 13715 SW 51ST TERRACE
CITY-ST-ZIP MIAMI, FL 33175 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 4511 SW 124 Terr -
CITY-ST-ZIP MIRAMAR FL 33027 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-07 (305) 218-1064

Date

Daytime Phone #