## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **DOCUMENT # P05000119179** TIVISION OF CORPORATION 1. Entity Name G & L UNITED CORP OF OCT -6 AMIL: OF Principal Place of Business Mailing Address 1140 NE 191 STREET 1140 NE 191 STREET APT D-22 APT D-22 NORTH MIAMI BEACH, FL NORTH MIAMI BEACH, FL 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03302006 CR2E034 (11/05) Applied For 4. FEI Number City & State City & State 20-3787 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CONCHA, GUILLERMO Street Address (P.O. Box Number is Not Acceptable) 1140 NE 191 STREET APT D-22 NORTH MIAMI BEACH, FL City Zip Code FL 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 lamiliar with, and accept SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. D TITLE ☐ Change ■ Addition TOTE ☐ Delete CONCHA, GUILLERMO A NAME NAME **700080580037** 10/06/06--01050--011 \*\*i9 1140 NE 191 STREET APT, D-22 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORTH MIAMI BEACH, FL CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE OROZCO, LORENA A NAME NAME 1140 NE 191 STREET APT, D-22 STREET ADDRESS STREET ADDRESS NORTH MIAMI BEACH, FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete HILE NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 aggress, with all other like empowered.

SECRETARY OF STAIL

Miami, Florida Tallahassee, Fl

Division of Corporation Tallahassee, Fl.

RE: Annual Report 2006 G & L United Corp Fl No. P05000119179 Fed ID # 20-3387919

Attached our check by \$ 150.00 covering the fee of the reference.

We never received the report in order to file it.

We went to the Bank to apply for a loan and they notice to us that the report was due and then we sent it.

Thank you for you attention to this question.

Guillermo Concha