2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

VISION OF CORPORATION DOCUMENT # P05000119179 06 OCT -6 AM 8: 00 1. Entity Name G & L UNITED CORP 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 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 03302006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For 20-338791 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name 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 familiar with, and accept the obligations of registered agent. 8/21/66 Signature, typed or printed name of registered agent and title if applicable (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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Delete Change Addition TITLE TITLE CONCHA, GUILLERMO A NAME NAME 1140 NE 191 STREET APT, D-22 STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-\$1-ZIP NORTH MIAMI BEACH, FL fillE ☐ Delete TITI F ☐ Change ■ Aggition OROZCO, LORENA A NAME NAME 1140 NE 191 STREET APT, D-22 STREET ADDRESS sírice I Abúlic55 CITY ST ZIP NORTH MIAMI BEACH, FL CITY-ST-ZIP Change ■ Addition TITLE THLE Delete NAME NAMŁ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP ☐ Change Addition THE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS Chir Si Zir CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY ST ZIP ☐ Delete Change Adaition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

FILLU SELRETARY OF STATE 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