## ·2001 UNIFORM BUSINESS REPORT (UBR)

## May 04, 2001 8:00 am Secretary of State DOCUMENT # P93000006204 G.P.& A. CONSULTING, INC. 05-04-2001 90112 048 \*\*\*158.75 Principal Place of Business Mailing Address 17 NW 168 ST 17 NW 168 ST MIAMI FL 33169 MIAMI FL 33169 E0060703 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0395013 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BRADBURY US PROPERTY INVESTMENT & AUCTION, INC. 111 N.W. 183RD STREET **STE 518 MIAMI FL 33169** Int for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits this state ed agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. Addition TITLE □ Delete TITLE POPPER, GEORGE NAME NAME STREET ADDRESS 17 NW 168ST STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAM! FL 33169 ■ Addition ☐ Change TITLE ☐ Delete TITLE BRADBURY, RICHARD M NAME NAME STREET ADDRESS STREET ADDRESS 17 NW 168TH CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33169 Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition □ Delete NAME STREET ADDRESS STREET ADDRESS

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all the empowered.

CITY-ST-ZIP

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CITY-ST-ZIP

D TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Daytime Phone #