

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 08, 1996 08:00 AM**  
**Secretary of State**

DOCUMENT # **P93000011758 (8)**

1. Corporation Name  
**G & G SERVICE SUPPLY, CORP.**



Principal Place of Business Mailing Address  
**4471 NW 36 STREET STE 201-B MIAMI SPRINGS FL 33166 US**

2 Principal Place of Business 2a. Mailing Address  
21 Sub, Apt #, etc. 26 Sub, Apt #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

3. Date Incorporated For Qualified **02/08/1993** 3a. Date of Last Report **07/11/1995**  
4. EIN Number **65-0398129** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

**9. Name and Address of Current Registered Agent**

**RODRIGUEZ, ENRIQUE  
644 NW 123 PATH  
MIAMI FL 33182**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the Agent, Secretary, or the President, Director, or Officer

Signature of the Agent, Secretary, or the President, Director, or Officer

DATE

12. OFFICERS AND DIRECTORS  
1. TITLE  DELETE **P**  
2. NAME **RODRIGUEZ, GRACE**  
3. STREET ADDRESS **11256 SW 159TH AVE**  
4. CITY, STATE, ZIP **MIAMI FL**  
5. TITLE  DELETE **V**  
6. NAME **RODRIGUEZ, ENRIQUE**  
7. STREET ADDRESS **644 NW 123 PATH**  
8. CITY, STATE, ZIP **MIAMI FL 33182**  
9. TITLE  DELETE  
10. NAME  
11. STREET ADDRESS  
12. CITY, STATE, ZIP  
13. TITLE  DELETE  
14. NAME  
15. STREET ADDRESS  
16. CITY, STATE, ZIP  
17. TITLE  DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1. TITLE  Change  Addition  
2. NAME **U. RODRIGUEZ ENRIQUE**  
3. STREET ADDRESS **11256 SW 159 AVE**  
4. CITY, STATE, ZIP **MIAMI FL 33196**  
5. TITLE  Change  Addition  
6. NAME  
7. STREET ADDRESS  
8. CITY, STATE, ZIP  
9. TITLE  Change  Addition  
10. NAME  
11. STREET ADDRESS  
12. CITY, STATE, ZIP  
13. TITLE  Change  Addition  
14. NAME  
15. STREET ADDRESS  
16. CITY, STATE, ZIP  
17. TITLE  Change  Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 registered or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Enrique Rodriguez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-96 (305) 889-5998

CR2E034 (12/95)