

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P93000038573 (0)**

1. Corporation Name
THE GREAT SIERRA GROUP, INC.



Principal Place of Business

13903 NW 67TH AVE.
210
MIAMI LAKES FL 33014
US

Mailing Address

P. O. BOX 820093
S. FLORIDA FL 33082-3096
US

3. Date Incorporated or Qualified **05/25/1993** 3a. Date of Last Report **03/13/1995**

4. FEI Number **65-0415857** 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

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
774 N.W. 155 TERRACE
83
84 City **PEMBROKE PINES** FL 85 Zip Code **33028**

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

**NEUHART, GEORGE
14836 BRECKNESS PL
MIAMI LAKES FL 33016**

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

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14. I do hereby certify that the information supplied to this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify 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 12 or Block 13 if changed or omitted in compliance with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/96

905-822-8611

CR2E034 (12/95)