FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION



G.G.H. & ASSOCIATES ETHNO-GERONTOLOGICAL CONSULT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P93000088693 (5)

FILED Mar 13 1998 8:00am Secretary of State

Change

Addition

ANTS,	INC.					
Principal Place of Business Mailing Address					4 13001000 110 talon distration (1541 abili abili abili abili abili abili	hile eitte fethe filt anet
13300 SW 108TH COURT MIAMI FL 33176		13300 SW 108TH COURT MIAMI FL 33176			DO NOT WRITE IN THIS SP.	ACE
					3. Date Incorporated or Qualified	· · · · · · · · · · · · · · · · · · ·
i					01/03/1994	
2. Principal P	lace of Business	2s. Mailing Address			4. FEI Number	Applied For
21	26			65-0457859	Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Ζιp	Cou	ntry	8. This corporation owes or has paid the curren	
24	25	29	30			Yes No
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Registered Ag	jent
HERNANDEZ, GEMA G				81 Name		
13300 SW 108TH COURT			ŀ	62 Street Add	dress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33176				83		<u></u>
				84 City		85 Zip Code
			ı	City	FL i	85 Zip Code
agent la SIGNATURE	m familiar with, and accept the oblig	gations of, Section 607.0505, FI	orida Statı	ites.	rporation submits this statement for the purpose of clation's board of directors. I hereby accept the appoin	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	Р	DELETE	1.1 TIT	LE		Change Addition
NAME	HERNANDEZ, GEMA G		1.2 NA	ME		
STREET ADDRESS	13300 SW 108TH COURT		1.3 STI	HEET ADDRESS		
C/TY-S1-ZIP	MIAMI FL 33176		1.4 CIT	Y-ST-21P		
TITLE		DELETE	21111	LE	L	Change Addition
NAME			2.2 NA	ME		
STREET ADDRESS			2 3 STI	REET ADDRESS		
CITY-ST-ZIP				IY-ST-ZIP		7.0
TITLE		☐ DELETE	3.1 717		L.	Change Addition
NAME			3.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		DELETE		Y-ST-ZIP		Choose Addition
TITLE		☐ DETEIF	4.1 111		L.	Change Addition
NAME			4. 2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		DELETE		Y-ST-ZIP		Change Addition
TITLE		L') pere te	5.1 T(T)		; ;	Primings [7] Wholings
NAME :	•	t	5.2 NAI	1		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP		

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 receiver or turned were 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 oppose attaching with a squiress.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

61 TITLE 6.2 NAME

DELETE

SIGNATURE:

TITLE

STREET ADDRESS