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/ PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Mar 05 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000016056 (1)

GICC CAPITAL CORP.

SIGNATURE:

Principal Place of Business Mailing Address 5161 COLLINS AVENUE % PACKMAN NEUWAHL & ROSENBERG 1500 SAN REMO AVE., SUITE 125 MIAMI BEACH FL 33140 CORAL GABLES FL 33146 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/28/1994 2. Principal Place of Business 2a. Mailing Address 4. FFI Number Applied For 65-0483725 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zip Country Zio Country 8. This corporation owes or has paid the current year Intangible X Yes Personal Property Tax due June 30. 24 25 29 30 ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GANGEL, RICHARD **B1 5161 COLLINS AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) PENTHOUSE A 83 MIAMI BEACH FL 33140 84 City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PD DELETE TITLE 1.1 TITLE Change ☐ Addition GANGEL, RICHARD NAME 1.2 NAME 5161 COLUNS AVENUE, PH A STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33140 CITY - ST - ZIP 1.4 CITY-ST-ZIP STD DELETE Change Addition TITLE 21 TITLE GANGEL, RONI NAME 22 NAME 5161 COLLINS AVENUE, PH A STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 33140 CITY-\$T-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 41 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$1-ZIP 4.4 CITY - ST- ZIP DELETE Change TITLE Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITL€ NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 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 receiver or trusted employeed 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 puth an approach.