

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000000932

1. Corporation Name
GRAVITY BUILDERS INC.

P95000000932

Principal Place of Business
**20316 N.W. 27TH CT.
MIAMI FL. 33056**

Mailing Address
**20316 N.W. 27TH CT.
MIAMI FL. 33056**

3. Date Incorporated or Qualified JAN. 5, 1995	3a. Date of Last Report N.A.
4. FEI Number 65-0549752	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	

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

9. Name and Address of Current Registered Agent
**CEPHAS NEMZOD
20316 N.W. 27TH CT.
MIAMI FL. 33056**

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. City
85. Zip Code

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 of person making change of registered office and agent, or both, if applicable

Signature of person making change of registered office and agent, or both, if applicable

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PRESIDENT
NAME	CEPHAS NEMZOD
STREET ADDRESS	20316 N.W. 27TH CT
CITY, ST, ZIP	MIAMI FL. 33056
TITLE	VICE PRESIDENT
NAME	LOSHINGTON WYNTER
STREET ADDRESS	13110 S.W. 20TH ST.
CITY, ST, ZIP	MIRAMAR FL. 33027
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	☐ Change ☐ Addition
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	☐ Change ☐ Addition
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	☐ Change ☐ Addition
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	☐ Change ☐ Addition

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*****208.75**

SIGNATURE: LOSHINGTON WYNTER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4. 20. 96 **(954) 431 5685**

CR2E034 (12/95)