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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500004898 (9)

G R C AMERICA INC.

FILED Mar 11 1997 8:00am Secretary of State



Dein sing LD	and of Division on	Maillion Baldings						
Principal Place of Business Mailing Address 4338 S.W. 8TH ST. 4338 S.W. 8TH ST.								
MIAMI FL 33	3134	MIAMI FL 33134-2673						
					 Date Incorporated or Qualified 01/19/1995 		of Last R 9/1996	eport
2. Principal	Place of Business	2a, Mailing Address			4, FEI Number		I A _E	plied For
21		26			65-0547712		No	t Applicable
Suite, Ar 22	et. #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & St	tate	City & State			6. Election Campaign Financing		\$5.00	
23		28	·· -		Trust Fund Contribution		Added	
<i>Z</i> ip ====	Country	Ì Zip ├──	Cou	niry	8. This corporation has liability to			. 199.032,
24	25] g. Name and Address of Cur	29 ront Pagislared Apont	30		Florida Statutes 10. Name and Address of New F	TK	No	
		teur wagistaran waant	•	81 Name	10. Name and Address of New F	egisteren Al	10111	
	IRAHIM, JIHAD T			T TGATE				
	338 S.W. 8TH ST. IAMI FL 33134			82 Street Address (P.O. Box Number is Not Acceptable)				
М	IAMI FL 33134		}	83				
				30				
				84 City		FL	85 Zip (Code
	1000	000 and 007 4500 Ft -ida Stat			rporation submits this statement for the ation's board of directors. I hereby acc		<u> </u>	a ranintarad
SIGNATUR	Signature, typed or printed name of registered	agen; and title if applicable (N	IOTE Registered	d Agent signature req	uired when rainstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	25 IN 12
12. Title	D	DELETE	1,1 Til	n F	ADDITIONS/CHANGES TO OFF		Change	Addition
NAME	IBRAHIM, JIHAD T	<u></u>	1.2 NA			_	_ onengo	
STREET ADDRES	4000 C WE OTH CT			REET AODRESS	•			
DITY - ST - ZIP	MIAMI FL 33134		1	TY-ST-ZIP				
TITLE	D	DELETE	2.1 10	·			Change	Addition
NAME	IBRAHIM, HICHAM T		2.2 NA	AME .				
STREET ADDRES	s 4338 S.W. 8TH ST.		2.3 ST	REET ADDRESS				
CHY-ST-ZIP	MIAMI FL 33134		2.4 C	ITY-ST-ZIP				
TITLE		DELETE	3.1 Til	LLE	100 Laboratoria		Change	Addition
NAMe			3.2 NA	AME				
STREET ADDRESS	82		3.3 \$1	reet address				
CITY - ST - ZIP				ITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TIT			L	Change	Addition
NAME			4.2 N	ame)				
STREET ADURES	85		4.3 ST	REET ADDRESS				
CITY-ST-7IP		Printe		TY-ST-ZIP			Chants	Andid
TITLE		☐ DELETE	5117			L	Change	Addition
NAME			52 N/	- 1				
STREET ADDRES	SS !			REET ADDRESS				
CITY - ST - ZIP		DELETE		TY-SY-ZIP			Change	Addition
THLE		□ Dereie	61 []	i		ι	Change	L. ROUIION
NAME	00		62 N/	I .				
STHEET ADDRES	77			MEET ADDRESS				
CITY-\$1-7:P			■ 6.4 Cl	TY-ST-ZIP				

14. I do 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 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.

