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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000008060 (2)

GMB ENTERPRISES, INC.

Principal Place of Business 403 N.W. 8TH AVENUE GAINESVILLE FL 32601

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

Mailing Address

403 N.W. 8TH AVENUE GAINESVILLE FL 32801

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

29

FILED May 01 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intaggible Personal Property Tax due June 30. Yes X No

4-23-98 407-357-9198

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified 01/31/1995

59-3310890

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
BANDY, GEORGE M		B1	Name		
7400 LAKE MARSHA DRIVE ORLANDO FL 32819			Street	Address (P.O. Box Number is Not Acceptable)	
			82 Street Address (P.O. Box Number is Not Acceptable)		
		83			
		84	City	85 Zip Code	
		104	City	FL 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					
10			ent signatur	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.		3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	BANDY OFORGE AL	1.2 NAME		O Shange C Accinon	
STREET ADDRESS	TARE LANG STANDALLA DONE	1.3 STREET ADDRESS			
	CARICONIA E EL COCAC			1	
CITY-ST-ZIP TITLE		1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition	
NAME		2.2 NAME			
STREET ADDRESS	■	2.3 STREET A			
CITY-ST-ZIP		2.4 CITY-ST-ZIP		., .,	
TITLE		3.1 TITLE		☐ Change ☐ Addition	
NAME	3.	3.2 NAME			
STREET ADDRESS	3.	3.3 STREET ADDR			
City-St-ZIP	3.	3.4. CITY - ST - ZIP			
TITLE	☐ DELETE 4.	4.1 TITLE		Change Addition	
NAME	4.	4. 2 NAME			
STREET ADORESS	4.	3 STREET	ADDRESS		
CITY - ST - ZIP		4 CITY-S	T-ZIP		
TITLE	DELETE 5.	5.1 TITLE		☐ Change ☐ Addition	
NAME	5.	2 NAME			
STREET ADDRESS	5.	5.3 STREET			
City-St-ZiP		4 CHY-S	T - ZIP		
TITLE	DELETE 6	61 TITLE		☐ Change ☐ Addition	
NAME	6.	6.2 NAME			
STREET ADDRESS	6.	6.3 STREET ADDR			
CITY - ST - ZIP		6.4 CITY - ST - ZIP			
14. Thereby 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 suppliemental 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					

Country