

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004 8:00 am
Secretary of State

04-15-2004 90054 002 *2,857.50
04-15-2004 90054 004 *5,080.00

DOCUMENT # P95000008643

1. Entity Name
G-P NORT, INC.



Principal Place of Business
2295 CORPORATE BLVD NW
SUITE 222
BOCA RATON, FL 33431

Mailing Address
2295 CORPORATE BLVD NW
SUITE 222
BOCA RATON, FL 33431

66411009



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03122004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number
65-0554860

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HERRICK, NORTON
2295 CORPORATE BLVD NW
SUITE 222 P O BOX 5010
BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VPS
NAME NORTON HERRICK
STREET ADDRESS 2295 CORPORATE BLVD N.W. STE. 222
CITY-ST-ZIP BOCA RATON, FL 33431 ☐ Delete

TITLE PAS
NAME HOWARD HERRICK
STREET ADDRESS 2 RIDGEDALE AVE STE 370
CITY-ST-ZIP CEDAR KNOLLS, NJ 07927 ☐ Delete

TITLE VPAS
NAME MICHAEL HERRICK
STREET ADDRESS 2 RIDGEDALE AVE STE 370
CITY-ST-ZIP CEDAR KNOLLS, NJ 07927 ☐ Delete

TITLE C
NAME KERMALLI, NISAR
STREET ADDRESS 2 RIDGEDALE AVE STE 370
CITY-ST-ZIP CEDAR KNOLLS, NJ 07927 ☐ Delete

TITLE VPAS
NAME HERRICK, ELAYNE
STREET ADDRESS 400 SE 5TH AVE, PH 1104
CITY-ST-ZIP BOCA RATON, FL 33432 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

VPS