## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000019153 (2)

**GMCC CORPORATION** 

## FILED Jul 16 1998 8:00am Secretary of State

GIVIOU V							
Principal Plac	ce of Business	Ma	lling Address				
5300 W. JACK		530	5300 W. JACKSON ST.				
PENSACOLA FL 32506 PENSACOLA FL 32506							
US		US					DO NOT WRITE IN THIS \$PACE
							3. Date Incorporated or Qualified 03/06/1995
2. Principal Place of Business 2a. Malling Address				,			4. FEI Number Applied For
21			26				<b>59-3321685</b> Not Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				5, Certificate of Status Desired \$8.75 Additional
22			27				Fee Required
City & State City &			City & State	ty & State			Election Campaign Financing \$5.00 May Be
23			28				Trust Fund Contribution Added to Fees
Zip	Country Zip		Zip	Country			8. This corporation owes or has paid the current year intangible
24	25	29		30			Personal Property Tax due June 30. Yes No
	9. Name and Add	ress of Current Regist	ered Agent	·····			10. Name and Address of New Registered Agent
FIES	STA, CORAZON H				81	Name	
21 SOUTH 72ND AVENUE					_		
PENSACÓLA FL 32506					82	Street #	Address (P.O. Box Number is Not Acceptable)
,	OVICABLLE OFFICE			-	83		
					"		
L. 1					B4	City	FL 85 Zip Code
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the ab office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, section 607.0505, Florida States.						the corpo	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE		-	,				
OIOIATORE		me of registered agent and title if	applicable. (NC	TE: Registere	od Age	ent signaturi	e required when reinstating) DATE
12.		OFFICERS AND DIREC	CTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			1.1 TITL	1.1 TITLE		Change Addition	
NAME	FIEȘTA, CORAZON H			1.2 NAME			
STREET ADDRESS 21 SOUTH 72ND AVENUE		AVENUE	1.3 STF		EETA	DDRESS	
CITY-ST-ZIP	DEMONOUN EL SORGO				1.4 CITY-ST-ZIP		
TITLE	P	<b>⋈</b> DELETE			2.1 TITLE		Change Addition
NAME	LINO, LEON P						
STREET ADDRESS	454 72ND AVENUE				2.3 STREET ADDRESS		LIND, LEON P 454 SOUTH 72ND AVE
	PENSACOLA FL 32506				2.3 STREET AUDRESS		PENSACOIA, FL 32506
				2.4 CITY-ST-ZIP			
TITLE	HAYAG, GUILLERMO T		3.1 TITL			P/T Change Addition	
NAME	FATA PEVOTANE DO			3.2 NAW	E	1	HAYAG, GUILLERMOTT. 5670 KEYSTONE RD.
STREET ADDRESS				3.3 STREET		DDRESS	
CITY-ST-ZIP	PENSACOLA FL 32504		3.4 CITY	3.4 CITY-ST-ZIP		PENSACOLA, FL 32504	
TITLE	DELETE		4.1 TITL	4.1 TITLE		Change Addition	
NAME				4.2 NAME			5
STREET ADDRESS	ETADORESS			4.3 STRE	4.3 STREET ADDRESS		
CITY-ST-ZIP				4.4 CITY	-ST-Z	ZIP	
TITLE	DELETE			5.1 TITLE		Change Addition	
NAME				5.2 NAM	E		La Change La Auditori
STREET ADDRESS					STREET ADDRESS		
CITY-ST-ZIP				5.4 CITY			
TITLE			T DELETE	6.1 TITLI		.ir	
NAME			DELETE				Change Addition
				6.2 NAM			}
STREET ADDRESS CITY-ST-ZIP				6.2 NAM 6.3 STRE 6.4 CITY	ET A		

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 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 organ attachment with an address.

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CR2E034 (5/98)