

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000027451 (0)

1. Corporation Name

GCN PRODUCTS, INC.



Principal Place of Business

Mailing Address

3050 BISCAYNE BLVD.
SUITE 700
MIAMI FL 33137

3050 BISCAYNE BLVD.
SUITE 700
MIAMI FL 33137

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

3. Date Incorporated or Qualified
04/06/1995

3a. Date of Last Report
N/A

4. FET Number

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~O'NAGHTEN, JUAN T~~
~~2605 SOUTH BAYSHORE DR~~
~~MIAMI FL 33~~

81 Name David E. Marko, Esq.
82 Street Address (P.O. Box Number is Not Acceptable)
One Biscayne Tower, Suite 2600
83 2 S. Biscayne Blvd
84 City Miami FL 33131

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 607.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating.)

4/21/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	DELETE
NAME	MELTZER, BARRY	
STREET ADDRESS	3050 BISCAYNE BLVD. #700	
CITY - ST - ZIP	MIAMI FL 33137	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	P	Change	Addition
1.2 NAME	LeClainche, Jeremy		
1.3 STREET ADDRESS	3050 Biscayne Blvd. #700		
1.4 CITY - ST - ZIP	Miami, FL 33137		
2.1 TITLE	S/T	Change	Addition
2.2 NAME	Pelkier, Mike		
2.3 STREET ADDRESS	3050 Biscayne Blvd. #700		
2.4 CITY - ST - ZIP	Miami, FL 33137		
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE	40000018363114	Change	Addition
5.2 NAME	-05/23/96--01016--025		
5.3 STREET ADDRESS	***200.00		
5.4 CITY - ST - ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.30.96

305/573-2900

Date

Daytime Phone

CR2E034 (12/95)