

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000032254 (1)**

1. Corporation Name
G.N.G. INTERNATIONAL, INC.



Principal Place of Business 2029 NW 58TH TERRACE LAUDERHILL FL 33313	Mailing Address 2029 NW 58TH TERRACE LAUDERHILL FL 33313
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3. Date Incorporated or Qualified 04/21/1995	3a. Date of Last Report
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2. Principal Place of Business 21 2471 NW 37 ST. Suite, Apt. #, etc.	2a. Mailing Address 26 7471 NW 37 ST Suite, Apt. #, etc.	4. FEI Number 65 0577623	Applied For Not Applicable
22 City & State 23 LAUDERHILL FLA	27 City & State 28 LAUDERHILL FLA	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
24 Zip 33319	25 Country USA.	29 Zip 33319	30 Country USA.
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent GAGNON, NELSON 2029 NW 58TH TERRACE LAUDERHILL FL 33313		10. Name and Address of New Registered Agent	
81 Name NELSON GAGNON	82 Street Address (P.O. Box Number is Not Acceptable) 7471 NW 37 ST	83	84 City LAUDERHILL
		85	Zip Code FL 33319

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 **NELSON GAGNON, PRESIDENT** *Nelson Gagnon* **8/15/96**
Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when registering.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GAGNON, NELSON 2029 NW 58TH TERRACE LAUDERHILL FL 33313	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GAGNE, GUY 4880 SW 26 ST. PEMBROKE PINES FL 33023	<input checked="" type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Nelson Gagnon* **NELSON GAGNON** **8/15/96** **954 484-6391**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)