FILE NOW: FILING FEE AFTER MAY 1ST IS \$5\$0.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P95000060439 (3)

G.G.C., CORP.

F	Principal Place of Business	Mailing Address				I IBBILIBUE SIU IBIUI BIIII BBILI UBIIA QBIII BELLU	BIGER BUILL GIRDU EERSU INII 1801		
	21332 WEST DIXIE HWY NORTH MIAMI BEACH FL 33180 US	21332 WEST DIXIE HWY NORTH MIAMI BEACH FL 33180 US				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 08/04/1995			
	2. Principal Place of Business	2a. Mailing Address				4. FEI Number	Applied For		
21		26				65-0599417	Not Applicab		
22	Suite, Apt. #, etc.	Suite, Apt. #,	etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
23	City & State	City & State	& State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
24	Zip Country	Zip 29	30 Co	untry		This corporation owes or has paid the c Personal Property Tax due June 30.	urrent year Intangible		
	9. Name and Address of Curre	nt Registered Agent	10. Name and Address of New Registered Agent						
	GORIN, MOISES			81	Name				
	21332 WEST DIXIE HWY			82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
NORTH MIAMI BEACH FL 33180									
				83					

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE													
12.	OFFICERS AND DI	RECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12										
TITLE	VSD	DELETE	1.1 TITLE		Change	Addition							
NAME	gorin, mendel		1.2 NAME										
STREET ADDRESS	2200 SW 84TH AVENUE		1.3 STREET ADDRESS										
CITY-ST-ZIP	MIRAMAR FL		1.4 CITY-ST-ZIP										
TITLE	VTD	DELETE	2.1 TITLE	VTSD	Change	Addition							
NAME	GORIN, JUAN		2.2 NAME	CORIN, JUAN 21332 WEST DIKIE HIGHWAL									
STREET ADORESS	2200 SW 84TH AVENUE		2.3 STREET ADDRESS		1								
CITY-ST-ZIP	MIRAMAR FL 33025		2. 4 CITY - ST - ZIP	N. MIAMI BEACH, FL. 33180									
TITLE	PD	DELETE	3.1 TITLE	60	Change	Addition							
NAME	Gorin, Moises		3.2 NAME	GORIN, MOISES									
STREET ADDRESS	2200 SW 84TH AVENUE		3.3 STREET ADDRESS	51335 M671 DIXIG HIGH AND									
CITY-ST-ZIP	MIRAMAR FL		3.4. CITY - ST-ZIP	DORIN, MOISES 21332 WEST DIXIE HIGHWAY N. MIAMI BEACH, FL.35180		J							
TITLE		DELETE	4.1 TITLE		Change	Addition							
NAME			4. 2 NAME										
STREET ADDRESS			4.3 STREET ADDRESS										
CITY-ST-ZIP			4.4 CITY-ST-ZIP										
TITLE		DELETE	5.1 TITLE		☐ Change	☐ Addition							
NAME			5.2 NAME	,									
STREET ADDRESS			5.3 STREET ADDRESS										
CITY-ST-ZIP			5.4 CITY - ST - ZIP										
TITLE		DELETE	6.1 TITLE		Change	Addition							
NAME			6.2 NAME										
STREET ADDRESS			6.3 STREET ADDRESS										
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14. 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 chapter on an attachment with an address.

SIGNATURE:

S'AURE REQUIRED

305-9371901

85

Zip Code

FILED

Feb 09 1998 8:00am

Secretary of State

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