

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

APPROVED
AND
FILED

pg. 182

97 AUG 25 AM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000065471 (1)
 1. Corporation Name
GNX CORPORATION

Principal Place of Business 6996 NW 50 ST MIAMI FL 33166	Mailing Address 6996 NW 50 ST MIAMI FL 33166
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1881 N.W. 87th Ave Suite, Apt. #, etc.	2a. Mailing Address 26 1881 N.W. 87th Ave. Suite, Apt. #, etc.
22 City & State 23 MIAMI FLORIDA	27 City & State 28 MIAMI FLORIDA
24 Zip 33126	25 Country U.S.A.
29 Zip 33126	30 Country

3. Date Incorporated or Qualified 08/23/1995	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0603575	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
BORRAJO, FERNANDO
6996 NW 50 ST
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	000002278378-8
84 City	-08/27/97-01060-003 ***165.00 FL ***165.00

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BORRAJO, FERNANDO	1.2 NAME	
STREET ADDRESS	6996 NW 50 ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	1.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOUSS, GABRIEL	2.2 NAME	
STREET ADDRESS	6996 NW 50 ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARAUJO, ALEJANDRO	3.2 NAME	
STREET ADDRESS	6996 NW 50 ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

A. Alvar
 8/25/97

14. I do 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 on an attachment with an address.

CR2E034 (4/97)

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GNX CORPORATION

The Honorable Secretary of State Sandra B. Mortham
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

Re.: Filing fee appeal from \$ 550.00 to \$ 165.00

Dear Madam:

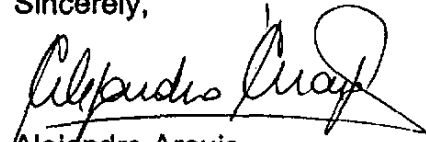
We have not received the first 1997 PROFIT CORPORATION ANNUAL REPORT packet to file on time due to a change of address of the corporation. We have only received the second notice with the filing request and fee of \$ 550.00.

We hereby appeal you to waive the \$ 550.00 filing fee and allow us to pay the regular filing fee of \$ 165.00.

We are filling the present packet and enclosing a check for \$ 165.00 pending your decision regarding the fees.

Awaiting a positive reply from you and thanking you in advance for your prompt attention to this matter.

Sincerely,


Alejandro Araujo
President

Beacon Center
1881 N.W. 87th Avenue * Miami, Florida 33126
Tel. (305) 593-5388 * Fax. (305) 593-5390