

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000008456

1. Corporation Name

GENERAL MARKETING, INC.

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90183 044 ***150.00



Principal Place of Business

Mailing Address

8133 S.W. 152ND COURT
MIAMI FL 33193

8133 S.W. 152ND COURT
MIAMI FL 33193

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/26/1996

4. FEI Number

65-0636367

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Same

26 13825 SW 88 ST

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 Miami, FL

24 Zip Same Country

29 33186 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

QUILES, MARGARITA

14415 SW 88TH STREET

#G-210

MIAMI FL 33193

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

13825 SW 88 ST #176

83

84 City Miami

FL

85 Zip Code 33186

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 DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PST
NAME QUILES, MARGARITA
STREET ADDRESS 14415 SE 88TH STREET, #210
CITY-ST-ZIP MIAMI FL 33186

1.1 TITLE Quiles Margarita
1.2 NAME 13825 SW 88ST #176
1.3 STREET ADDRESS Miami FL 33186
1.4 CITY-ST-ZIP

TITLE D
NAME QUILES, MARGARITA
STREET ADDRESS 14415 SW 88TH STREET, #210
CITY-ST-ZIP MIAMI FL 33186

2.1 TITLE Quiles Margarita
2.2 NAME 13825 SW 88ST #176
2.3 STREET ADDRESS Miami FL 33186
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Margarita Quiles 4/26/99 305 380-0214

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)