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

**PROFIT** 

FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 FILED 97 SEP 15 AM 11: 25 INTER PRISES COMPANY SECRETARY OF STATE TALLAHASSEE. FLORIDA Principal Place of Business Mailing Address 86 AVe 16802 S.W MiAMI, FL 33157 3. Date Incorporated or Qualified 3a. Date of Last Report ipal Place of Business . W 86 AV 26 2a. Mailing Address Applied For Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax onder s. 199.032, Florida Statutes Yes No 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 84 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. Thereby accept the appointment as registered agent. I am familiar min, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

SIGNA SIGNATURE 2 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. 96/6) 1.1 TITLE Change Addition TITLE George ALVARADO 1.2 NAME NAME 16802 S.W 86AVL STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY - ST- ZIP 2. 4 CITY - ST - ZIP DELETE Change \_\_\_ Addition TITLE 3 1 TITLE 32 NAME 3.3 STREET ADDRESS STREET ADDRESS \*\*\*\*170.00 \*\*\*\*170.00 34 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 41 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHTY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5 1 TITLE Change Addition NAME 52 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition 6.2 NAME NAME STREET ADDRESS 6 3 STREET ADDRESS 6 4 CHTY - ST - ZIP CITY-ST-7P 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 he 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 path; 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:

**Q** 

To: Florida Division of Corporations

Re: G & A Interprises

Whom It may Concern,

Enclosed please find a complete filing form. The reason for the delay is, that we never received this form before. When we called your office, your associates Barbara and (aalan) suggested that we write this explanation.

They also stated that your records shown that this form was returned by the Post Office. No explanation given.

Thank you.

G&A Interprises