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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # P96000037063 (0)

1. Corporation Name
G.I. AFFILIATES, INC.

Principal Place of Business	Mailing Address
2140 W. 68 STREET SUITE 305 HIALEAH FL 33016	P.O. BOX 56-0624 MIAMI FL 33256

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/29/1996

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

4. FEI Number: 65-0684876 ☐ 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 or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FERNANDEZ, MANUEL A
2140 W. 68 STREET
SUITE 305
HIALEAH FL 33016

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☑ DELETE	1.1 TITLE	CS	☐ Change ☑ Addition
NAME	MADERAL, FRANCISCO R		1.2 NAME	MADERAL, RAD.	
STREET ADDRESS	2140 WEST 68TH STREET		1.3 STREET ADDRESS	2140 W. 68th St., #305	
CITY-ST-ZIP	HIALEAH FL 33016		1.4 CITY-ST-ZIP	Hialeah, FL 33016	
TITLE		☐ DELETE	2.1 TITLE	D	☐ Change ☑ Addition
NAME			2.2 NAME	Gema Pina	
STREET ADDRESS			2.3 STREET ADDRESS	2140 W. 68 St., #305	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	Hialeah, FL 33016	
TITLE		☐ DELETE	3.1 TITLE	D	☐ Change ☑ Addition
NAME			3.2 NAME	Victor Padilla Sr.	
STREET ADDRESS			3.3 STREET ADDRESS	2140 W. 68 St., #305	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Hialeah, FL 33016	
TITLE		☐ DELETE	4.1 TITLE	D	☐ Change ☑ Addition
NAME			4.2 NAME	Jesus Perez	
STREET ADDRESS			4.3 STREET ADDRESS	2140 W. 68 St., #305	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Hialeah, FL 33016	
TITLE		☐ DELETE	5.1 TITLE	PSTD	☐ Change ☑ Addition
NAME			5.2 NAME	Fernandez, Manuel	
STREET ADDRESS			5.3 STREET ADDRESS	2140 W. 68th St., #305	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Hialeah, FL 33016	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

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.

SIGNATURE: _____ 04/29/98