2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

SIGNATURE:

FILED DOCUMENT # P96000092149 May 04, 2004 08:00 AM Secretary of State GDP DEVELOPMENT, INC. Principal Place of Business Mailing Address 1221 EAST ROBINSON STREET 1221 EAST ROBINSON STREET ORLANDO, FL 32801 ORLANDO, FL 32801 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04012004 Chg-P CR2E034 (10/03) City & State 4. FEI Number City & State Applied For 59-3415243 Not Applicable Zio Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FONG, DAVID Street Address (P.O. Box Number is Not Acceptable) 1221 EAST ROBINSON STREET ORLANDO, FL 32801 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITI F TITLE ☐ Change ☐ Addition ☐ Delete FONG, GEORGE NAME NAME U00000155555 STREET ADDRESS 1221 EAST ROBINSON STREET STREET ADDRESS 05/05/04-80040-009 150,00 CITY-ST-7IP CITY-ST-71P ORLANDO, FL 32801 DV ☐ Delete TITLE ☐ Change ☐ Addition TITLE FONG, PHILLIP NAME NAME STREET ADDRESS 1221 EAST ROBINSON STREET STREET ADDRESS CITY - ST- 712 ORLANDO, FL 32801 CITY-ST-ZIP DŞT Change TITLE Delete TITLE ☐ Addition FONG, DAVID NAME 1221 EAST ROBINSON STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ORLANDO, FL 32801 TITLE Delete TITLE ☐ Change Addition NAME **SMAN** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Addition TITLE Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP 12. 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 report or supplemental 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 10 or Block 11 if

DAVID

Daytime Phone #