

48-98 B 4323 C

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

FILED

Apr 08 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000012913 (4)

1. Corporation Name  
G.F.S. OF MIAMI, INC.

Principal Place of Business 2928 LOUISE ST. MIAMI FL 33133	Mailing Address 2928 LOUISE ST. MIAMI FL 33133
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 262 ANDALUSIA AVE Suite, Apt. #, etc. 22		2a. Mailing Address 26 2928 LOUISE ST Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified 02/10/1997	
City & State 23 COCA GABLES, FL		City & State 28 MIAMI FL		4. FEI Number 65-0725709 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
Zip 24 33134		Country 25 MIAMI-DADE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 29 33133		Country 30 MIAMI-DADE		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Name and Address of Current Registered Agent DIMAGGIO, SERGIO 2928 LOUISE ST. MIAMI FL 33133				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 DIMAGGIO, SERGIO 2928 LOUISE ST. MIAMI FL 33133		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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  SERGIO DIMAGGIO 4/1/98  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS DIMAGGIO, SANDRA 2928 LOUISE ST. MIAMI FL 33133 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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, changed, or on an attachment with an address.

SIGNATURE:  SANDRA DIMAGGIO, PRESIDENT 4/1/98 305-9449

CR2E034 (10/97)