SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000041153 (2)

GENERAL SALES SERVICES GROUP INC.

7350 N.W. 7TH ST. 7350 N.W. 7TH ST. **SUITE 107** SUITE 107 MIAMI FL 33126 MIAMI FL 33126 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/08/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable \$8.75 Additional 21 26 65-0840430 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes or has paid the current year intangible Country Zio Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HORTA, EVELIO 7350 N.W. 7TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 107 **MIAMI FL 33126** City 84 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE 1.1 TITLE \_] DELETE \_\_ Change \_\_\_ Addition HORTA, EVELIO NAME 12 NAME 7350 N.W. 7TH ST. STREET ADDRESS 1.3 STREET ADDRESS MIÁMI FL 33126 CITY-ST-ZIF 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE 31 TITLE DELETE Change Addition 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 City-ST-ZIP CITY-ST-ZIP 4.1 TITLE TITLE DELETE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 5.1 TITLE \_\_\_ Addition Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE DELETE Change 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 accurate 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 () (III) () SIGNATURE:

6.2 NAME

6.3 STREET ADDRESS

FILED

Jul 08 1998 8:00am

Secretary of State