FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Jan 31, 2003 8:00 am **Secretary of State** P97000066199 DOCUMENT # 01-31-2003 90132 003 ***158.75 1. Entity Name G.C. HOMES, INC. Principal Place of Business Mailing Address 14425 COUNTRY WALK DR 14425 COUNTRY WALK DR MIAMI FL 33186 MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address 13032 S.W. 133rd Court 111 S.W. 3rd Street Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Sixth Floor City & State City & State 4. FEI Number Applied For 65-0803713 Miami, Florida 53 Miami, Florida Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired 33186 USA 33130 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <u>Elliott Harris, ESq.</u> SCHUMER, KARL J ESQ. Street Address (P.O. Box Number is Not Acceptable) 19495 BISCAYNE BLVD 111 S.W. 3rd Street SUITE 409 Sixth Floor AVENTURA FL 33180 ^{City} M<u>iami</u> Zip Code 33130 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. 2. 1 /30/03: SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Addition ☐ Delete GARCIA-CARILLO, MICHAEL A NAME NAME STREET ADDRESS 14425 COUNTRY WALK DR STREET ADDRESS 13032 S.W. 133rd Court CITY-ST-ZIP MIAMI FL 33186 CITY-ST-ZIP <u>Miami, Florida 33186</u> ☐ Addition Delete TITLE TITLE SD NAME SCHUMER, KARL J NAME Garcia-Carrillo, Pedro Jr. STREET ADDRESS STREET ADDRESS 19495 BISCAYNE BLVD, SUITE 409 13032 S.W. 133rd Court CITY-ST-ZIE CITY-ST-ZIP AVENTURA FL 33180 Miami, Florida 33186 TITLE Flehange TITLE --- Delete ☐ Addition VTSD NAME GARCIA-CARRILLO, PEDRO SR NAME STREET ADDRESS 14425 COUNTRY WALK DRIVE STREET ADORESS 13032 S.W. 133rd Court CITY-ST-ZIP MIAMI FL 33186 CITY-ST-ZIP Miami, Florida 33186 TITLE Delete TITLE 1 Change ☐ Addition CASTELLANOS, RAY NAME NAME STREET ADDRESS STREET ADDRESS 14425 COUNTRY WALK DR 13032 S.W. 133rd Court CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33186 <u>Miami, Florida 33186</u> Delete TITLE ☐ Change XX Addition NAME NAME Harris, Elliott STREET ADDRESS STREET ADDRESS 111 S.W. 3rd Street, Sixth Floor CITY-ST-ZIP CITY-ST-7IP Miami, Florida 33130 Change TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this feport 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 changed, or on an attachment with an address, with all office like empowered.

SIGNATURE:

FURE NEGUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 1/30/03

Date

(305)358-0146

Daytime Phone #