

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000084872

1. Entity Name
G.C. COMPANY, INC.

FILED
Jul 26, 2000 8:00 am
Secretary of State

07-26-2000 90043 021 ***150.00

Principal Place of Business

17360 N.W. 69TH CT. #203
MIAMI LAKES FL 33015

Mailing Address

17360 N.W. 69TH CT. #203
MIAMI LAKES FL 33015

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0787226**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GONZALEZ, LUIS
4995 N.W. 79TH AVE.
#112
MIAMI FL 33166

Name **GONZALEZ, LUIS**
Street Address (P.O. Box Number is Not Acceptable) **17360 N.W. 69th CT # 203**
City **MIAMI LAKES** **FL** Zip Code **33015**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **GONZALEZ, LUIS**
STREET ADDRESS **17360 NW 69 CT #203**
CITY-ST-ZIP **MIAMI FL 33015**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME **TIBISAY, GONZALEZ**
STREET ADDRESS **17360 NW 69 CT #203**
CITY-ST-ZIP **MIAMI FL 33015**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

G.C.COMPANY, inc

17360 N.W. 69 CT # 203
Miami, Florida 33015
305-821-9292

Attachment
D# P97000084872
00074909

DIVISION OF CORPORATIONS

UNIFORM BUSINESS REPORT FILINGS

P.O. BOX 1500

TALLAHASSEE

Miami, July 13, 2000

Dear Gentlemen,

We received the Doc. # P97000084872 Second Notice, which it is wrong, because we have not received a First Report Filing which should have come first. I called myself to your offices and a Representative of yours told me to send the report we just received with a check for the amount of \$150.00 and a letter stating what is being mentioned above. We hope by this way to have solved this inconvenience.

Thanks for your cooperation.

Sincerely,

Tibisay C. Gonzalez.

Tibisay Gonzalez
Vice-President

TG/ar-