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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000094016 (7)

GG & R INTERNATIONAL CORP.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					I INDUIROU IND JOSIS ODDIO ODDIO ODDIO ODDIO SENIO OLDIO BENES IRDIO BIRI (DDI	
15831 S.W. 143 COURT MIAMI FL 33177		15831 S.W. 143 COURT MIAMI FL 33177		DO NOT WRITE IN THIS	S SPACE	
					Date Incorporated or Qualified 10/31/1997	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0877120	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	······································		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip			8. This corporation owes or has paid the cu	
24	25	29	30			☐ Yes 🔀 No
	9. Name and Address of Currer	it Hegistered Agent		31 Name	10. Name and Address of New Registered	Agent
	EVEDO, JEANINE R		L	1		
	831 S.W. 143 CT. AMI FL 33177				dress (P.O. Box Number is Not Acceptable)	
			1	33		
			ļ	34 City	, Ft	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 epplicable (NOTE Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AN		13.	nga-ii aigita.ore req	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PSD	☐ DELETE	1.1 TITL	E		☐ Change ☐ Addition \$
HAME	ACEVEDO, JEANNINE R		1.2 NAN	IE .]
STREET ADDRESS	15831 S.W. 143 COURT		1.3 STR	EET ADDRESS		{
CITY-ST-ZIP	MIAMI FL 33177		1.4 CITY	-SI-ZIP		
TITLE	VPTD	☐ DELETE	2.1 TITL	F		☐ Change ☐ Addition C
NAME	GIL, GABRIEL		2.2 NAN	lE		
STREET ADDRESS	15831 S.W. 143 COURT		2.3 STR	EET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33177	T nevert		Y-ST-ZIP		
TITLE		DELETE	3.1 TITL			L Change L Addition
NAME STREET ADDRESS			3.2 NAN			
CITY-ST-ZIP				EET ADDRESS		1
TITLE		DELETE	4.1 T(TL	Y-ST-ZIP		Change Addition
NAME			4. 2 NA			U Ondrigo U Produtori
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		☐ DELETE	5.1 TITL			☐ Change ☐ Addition
NAME			5.2 NAM	E		
STREET ADDRESS			5.3 STRI	ET ADDRESS		
CITY+ST-ZIP			5.4 CITY	- ST - ZIP		
TITLE	_	DELETE	6.1 TITL			Change Addition
NAME			62 NAM	E		
STREET ADDRESS			63 STAI	ET ADDRESS		
CITY-ST-ZIP				- S1 - ZIP		
14. I hereby c	ertify that the information supplied wi	ith this thing does not qualify fo	or the exen	notion stated i	in Section 119.07(3)(i), Florida Statutes. I further c	ertify that the information

is frue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address.