

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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 APR 20 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 997000104367
1. Corporation Name

GMA INTERNATIONAL, INC.

Principal Place of Business: 8750 NW 100 ST BLDG #9 MIAMI, FL 33178 US
Mailing Address: 8750 NW 100 ST BLDG #9 MIAMI, FL 33178 US

DO NOT WRITE IN THIS SPACE

21	22	23	24	25	26	27	28	29	30	3. Date Incorporated or Qualified	4. FEI Number	Applied For
										12/11/97	65-0802441	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>					8.75 Additional Fee Required							
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>					5.00 May Be Added to Fees							
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				10. Name and Address of New Registered Agent			
GONZALEZ, MIRIAM V. 8750 NW 100 ST BLDG #9 MIAMI, FL 33178				CORPORATE ACCESS, INC. 1116-D THOMASVILLE ROAD MOUNT VERNON SQUARE TALLAHASSEE FL 32303			

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	11 TITLE	
NAME	GONZALEZ, MIRIAM V.	12 NAME	
STREET ADDRESS	8750 NW 100 ST BLDG #9	13 STREET ADDRESS	900002495089-- 2
CITY-ST-ZIP	MIAMI, FL 33178	14 CITY-ST-ZIP	-04/21/98--01047--005
		15	***150.00 ***150.00
TITLE		21 TITLE	
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: _____

CR2E034 (10/97)

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4/20/98