


2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000104888		
1. Entity Name GMH HOLDING CORP.		

Principal Place of Business THERREL BAISDEN, P.A. ONE S.E. 3RD AVENUE #2400 MIAMI, FL 33131	Mailing Address THERREL BAISDEN, P.A. ONE S.E. 3RD AVENUE #2400 MIAMI, FL 33131
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROSE, ELLEN ESQ.
THERREL BAISDEN, P.A.
ONE S.E. 3RD AVENUE #2400
MIAMI, FL 33131

DO NOT WRITE
IN THIS SPACE

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)
DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HIGIER, GERALD M 1541 SUNSET DRIVE CORAL GABLES, FL 34157
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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700052174127
04/27/05--01003--002 **\$55.00


12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Gerald M. Higier 4/13/05 305-666-2140
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED

05 APR 20 PM 4:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03222005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3550916	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	