2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 10, 2008 08:00 A Secretary of State

Daytime Phone #

Date

	AITHUAL	REFURI					
DOCUMENT # P99000074484 1. Entity Name GMD ENTERPRISES, INC.				Secretary of St			
Principal Plac	ce of Business	Mailing Address	•				
C/O GEORGE	: J. Tibol Ne lake drive	C/O GEORGE J. TIBOL 12251 TOWNE LAKE DRIVE					
	S, FL 33913	FORT MYERS, FL 33913		1 (83)(68) 118	(6) 10) 10 11 15 16 16 16 16 16 16	n co n (co n c	
							
				02062008	No Chg-P	CR2E	034 (11/05)
				4. FEI Numbe 65-0997			Applied For Not Applicable
					of Status Desired		\$8.75 Additional
	6. Name and Address of Current Re	aletered Agent	!	5. Certificate	DI Status Desireu	LJ	Fee Required
	u. Haire and Address of Correll (No	Rieteran wilant	-				
TIBOL, GE	EORGE J WNE LAKÉ DRIVE						
	ERS, FL 33913						
	e named entity submits this statement for the tions of registered agent.	e purpose of changing its register	ed office or register	ed agent, or both	n, in the State of Flo	rida. Lam	familiar with, and accept
SIGNATURE			.:		· 	,	
	Signature, typed or printed name of registered agent and	trie if applicable (NOTE: Hegisters	d Agent signature required	when reinstating)		DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	ncing \$5.	.00 May Be ed to Fees				
10.	OFFICERS AND DI]	1				
TITLE	P CEORCE						1
NAME STREET ADDRESS	TIBOL, GEORGE 12251 TOWNE LK DR						
CITY-ST-ZIP	FORT MYERS, FL 33913						
TITLE NAME	P TIBOL, DAVID		1		U00000	105295	4 1-007 150.00
STREET ADDRESS	12251 TOWNE LK DR				1157/257/1161	-::::::::::::::::::::::::::::::::::::::	-UU7 15U.UU
CITY-ST-ZIP	FORT MYERS, FL 33913		j				
TITLE NAME	P TIBOL, MARIA		İ				
STREET ADDRESS	12251 TOWN LK DR						
CITY-ST-ZIP	FORT MYERS, FL 33913						
TITLE							
NAME STREET ADDRESS							
CITY-ST-ZIP							
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NAME STREET ADDRESS			ŀ				
CITY-ST-ZIP	,						
TITLE E	AND A SECTION OF THE	•	1	,			
NAME	The second secon		# <u>(</u>)	. •			
STREET ADDRESS CITY-ST-ZIP				·			
12. I hereby o	I	s filing does not qualify for the ex-	mptions contained	in Chapter 119.	Florida Statutes. I	further cer	tify that the information
indicated of the cor	on this report or supplemental report is tru poration or the receiver or trustee empower or on an attachment with an address, with	ie and accurate and that my signa red to execute this report as requi	ture shall have the s	same legal effect	as if made under of	ath: that I	am an officer or director

GEORGE TIBOL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: