FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED Apr 26, 2004 8:00 am

DOCUMENT # 99000092174 1. Entity Name			Secretary of State 04-26-2004 91010 046 ***150.00
G.A.G.PUBLSHING, COMPANY			04-20-2004 91010 040 *** 130.00
- Carrier and Article		(*	
The state of the s	· · · · · · · · · · · · · · · · · · ·		
DO NOT WRITE	IN THIS SP	ACE	
2. Principal Place of Business 780 N.W. LeJeune Road	3. Mailing Address	<u> </u>	·_ *
Suite, Apt. #, etc. # 321	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State Miami, Florida	City & State		4. FEI Number 65-0971646 Applied For Not Applicable
Zip Country 33126	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
		· -	7. Name and Address of Current Registered Agent
DO NOT W	DITE	Name	رائية المستنبية والمنظر والمنظر والمعار والمعارض
Commence of the Commence of th	ray of the Britan and the second and	Street Addre	ss (P.O. Box Number is Not Acceptable)
IN THIS SP	ACE	a a	
		City	FL Zip Code
8. The above named entity submits this statement for	the purpose of changing its re	egistered office or reg	istered agent, or both, in the State of Florida.
SIGNATURE Signature, typeu or printed name of registered agent a	nd title (applicable (NOTE)	D. Control of the Con	
	I Share a second	Registered Agent signature re	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	January 1 - Ma After May 1 Amended	y 1 Fee is \$150.00 , Fee is \$550.00 UBR is \$61.25	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back) 11. OFFICERS AND I	January 1 - Ma After May 1 Amended Make Check Payable	y 1 Fee is \$150.00 , Fee is \$550.00 UBR is \$61.25	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
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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 on an attachment with an address with all other like empowered.

SIGNATURE: