

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000106636

1. Entity Name

G C & A ENTERPRISES, INC.

R

FILED
Jul 26, 2000 8:00 am
Secretary of State

07-26-2000 90004 020 ***150.00

Principal Place of Business

1100 WASHINGTON AVENUE
MIAMI BEACH FL 33139

Mailing Address

1100 WASHINGTON AVENUE
MIAMI BEACH FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-0183474

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORERA, LAZARO
1100 WASHINGTON AVENUE
MIAMI BEACH FL 33139

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature (Typed or Printed Name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

7/18/00

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)



FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.



\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MORERA, LAZARO
1100 WASHINGTON AVENUE
MIAMI BEACH FL 33139 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/00 305 673 7776 **RSB**
Date Daytime Phone #

CR2E034 (5/00)

PP91006106636

A0069481

**G C & A ENTERPRISES, INC.
1100 WASHINGTON AVENUE
MIAMI BEACH FL. 33139**

July 18, 2000

**FLORIDA DEPARTMENT OF STATE,
Division of Corporations,
P. O. Box 6327
Tallahassee, FL. 32314**

Re.: 2000 UBR

Dear Sir:

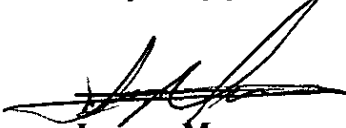
Enclosed you will find our check number 265 in the amount as \$150.00 to pay our Annual Corporation Report . We are sending the check today because we never received the first report and I would like to make some arrangements in the Corporation address, in order to make sure we are going to receive it each time.

The undersigned is the President and one hundred percent owner of the stocks so I am more that happy that you approve the following arrangements:

**G C & A ENTERPRISES, INC.
C/O Lazaro Morera,
1100 Washington Avenue
Miami Beach, FL. 33139-4612**

Thanking you in advance for your attention to this matter, I remain;

Very truly yours,



**Lazaro Morera
President**