3/99 561-988-0388

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).					
PROFIT . CORPORATION		FLORIDA DEPARTMENT OF STATE Katherine Harris		FILED	
ANNL	JAL REPORT		y of State	99 JUL 26 PH 4: 05	
	1000		CORPORATIONS	D. Laure JE, FLON	F
DOCUMENT # S10845				In Laure LEE, FLOR	IÕA
GBR ASSOCIATES, INC.					
					1010 AND DIEN 1010 AND DIEN 1811
Principal Plac	e of Business	Mailing Address			BIBIT BIBIT OTOLS BIBIT BIBIT DIBIT TOBS
123 NW 13TH 312	ST	123 NW 13TH ST 312			
BOCA RATON	TON FL 33432 BOCA RATON FL 33432 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				11/02/1990	
2. Principal P	lace of Business, Blue Lake Dr.			4, FEI Number 65-0225369	Applied For Not Applicable
Suite, Apt.	#, etc. Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	City & State 9 ty & State		CI	6. Election Campaign Financing	\$5.00 May Be
23 B D C	Calon FL	28 BOCa Rator	Country 2	8. This corporation owes the current year	Added to Fees
24 334	31 25 Valm Boach		30 Palm Beach	Intangible Personal Property. 10. Name and Address of New Registe	Yes No
ROSENBLUM, GERALD B.					
1036 PEPPERIDGE TERRACE 62 Street Address				ess (P.O. Box Number is Not Acceptable)	487852
BOCA RATON FL 33486					301041003
1			84 City		85 Zip Code
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					
12.	Signature, typed or printed name of registered agent a OFFICERS AND		7E Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICERS	
TITLE	d Rosenblum, Gerald B.	DELETE	1.1 TITLE 1.2 NAME		Change Addition
STREET ADDRESS	1036 PEPPERIDGE TERRACE		13 STREET ADDRESS		Į
CITY-ST-ZIP TITLE	BOCA RATON FL	DELETE	1.4 CITY-ST-ZIP		Change Addition
NAME		(2 2 NAME		Change Audition
6TREET ADDRESS CITY-ST-ZIP			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Crange Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-ST-ZIP		
NAME		[DECE1E	4 2 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADORESS		
TITLE		DELETE	5.1 TITLE	·	Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
NAME		L] DELETE	6.2 NAME		Change Addition
STREET ADDRESS			6 3 STREET ADDRESS		1-100
14. I hereby ce	rtify that the information supplied with the	is filing does not qualify for the	e exemption stated in sections and that my signature is	on 119.07(3)(i), Florida Statutes. I further cer	tify that the into matter
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; had I am an officer or director of the corporation of 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.					
alalan allan					

SIGNATURE: 4