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Jan 27 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S50797 (7)

1. Corporation Name:  
GANA, INC.

Principal Place of Business  
888 SOUTH MILITARY TRAIL  
WEST PALM BEACH FL 33415

Mailing Address  
888 SOUTH MILITARY TRAIL  
WEST PALM BEACH FL 33415-3908



3. Date Incorporated or Qualified 05/03/1991  
3a. Date of Last Report 06/19/1996

|                                |  |                        |  |  |  |                                |  |
|--------------------------------|--|------------------------|--|--|--|--------------------------------|--|
| 2. Principal Place of Business |  | 2a. Mailing Address    |  | 4. FEI Number<br>65-0261854  |  | Applied For<br>Not Applicable  |  |
| 21 Suite, Apt. #, etc.         |  | 26 Suite, Apt. #, etc. |  | 5. Certificate of Status Desired <input type="checkbox"/>  |  | \$8.75 Additional Fee Required |  |
| 22 City & State                |  | 27 City & State        |  | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>   |  | \$5.00 May Be Added to Fees    |  |
| 23 Zip Country                 |  | 28 Zip Country         |  | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No |  |                                |  |
| 24                             |  | 25                     |  | 29   |  | 30                             |  |

9. Name and Address of Current Registered Agent

YANNOPOULOS, GEORGE  
9904 CHAPMAN OAK COURT  
PALM BEACH GARDENS FL 33410

10. Name and Address of New Registered Agent

|   |                |
|---|----------------|
| 81 Name   |                |
| 82 Street Address (P.O. Box Number is Not Acceptable) |                |
| 83  |                |
| 84 City   | FL 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: George Yannopoulos (NOTE: Registered Agent signature required when reinstating) DATE: 01/11/97

| 12. OFFICERS AND DIRECTORS |                       | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                     |
|----------------------------|-----------------------|---|---------------------|
| TITLE                      | P                     | 11 TITLE  | VICE PRESIDENT      |
| NAME                       | YANNOPOULOS, GEORGE   | 12 NAME   | YANNOPOULOS, LYNNE  |
| STREET ADDRESS             | 888 S. MILITARY TRAIL | 13 STREET ADDRESS                                     | 888 S. MILITARY TR. |
| CITY-ST-ZIP                | W. PALM BEACH FL      | 14 CITY-ST-ZIP  | WPB FL 33410        |
| TITLE                      |                       | 21 TITLE  |                     |
| NAME                       |                       | 22 NAME   |                     |
| STREET ADDRESS             |                       | 23 STREET ADDRESS                                     |                     |
| CITY-ST-ZIP                |                       | 24 CITY-ST-ZIP  |                     |
| TITLE                      |                       | 31 TITLE  |                     |
| NAME                       |                       | 32 NAME   |                     |
| STREET ADDRESS             |                       | 33 STREET ADDRESS                                     |                     |
| CITY-ST-ZIP                |                       | 34 CITY-ST-ZIP  |                     |
| TITLE                      |                       | 41 TITLE  |                     |
| NAME                       |                       | 42 NAME   |                     |
| STREET ADDRESS             |                       | 43 STREET ADDRESS                                     |                     |
| CITY-ST-ZIP                |                       | 44 CITY-ST-ZIP  |                     |
| TITLE                      |                       | 51 TITLE  |                     |
| NAME                       |                       | 52 NAME   |                     |
| STREET ADDRESS             |                       | 53 STREET ADDRESS                                     |                     |
| CITY-ST-ZIP                |                       | 54 CITY-ST-ZIP  |                     |
| TITLE                      |                       | 61 TITLE  |                     |
| NAME                       |                       | 62 NAME   |                     |
| STREET ADDRESS             |                       | 63 STREET ADDRESS                                     |                     |
| CITY-ST-ZIP                |                       | 64 CITY-ST-ZIP  |                     |

14. I do 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 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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: George Yannopoulos DATE: 01/11/97 DAYTIME PHONE #: 561 687 5006

CR2E034 (9/96)