

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S79583

FILED
Feb 23, 2005
Secretary of State

Entity Name: G - M MIAMI MANAGEMENT, INC.

Current Principal Place of Business:

9100 S DADELAND BLVD
SUITE 1412
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9100 S DADELAND BLVD
SUITE 1412
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-0289637 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MENENDEZ, PEDRO
9100 S DADELAND BLVD
SUITE 1412
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MENENDEZ, PEDRO
Address: 435 LEUCADENDRA DRIVE
City-St-Zip: CORAL GABLES, FL 33156

Title: DSV () Delete
Name: GARCIA, HORACIO
Address: 6850 RIVIERA DR
City-St-Zip: CORAL GABLES, F 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HORACIO GARCIA

DSV

02/23/2005

Electronic Signature of Signing Officer or Director

_____ Date