FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** S91130 GMO FINANCIAL, INC. Principal Place of Business Maling Address 11790 S.W. 89TH ST. 11790 S.W. 89TH ST. MIAMI FL 33186-2166 MIAMI FL 33186-2166 3. Date Incorporated or Qualified 3a. Date of Last Report 04/18/1995 10/31/1991 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0293773 21 26 Not Applicable Suite, Apt. #, etc. Suite, Ant. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes ☐ No Zip $Z_{\mathbb{P}}$ Country 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 JEFFREY M. GREENBERG Street Address (P.O. Box Number is Not Acceptable) SAMOLE, MYRON M. 9700 S. DIXIE HWY. 11790 S.W. 89 STREET В3 **SUITE 1030 MIAMI FL 33156** 64 City 85 Zip Code MIAMI 33186 f Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of charging its registered office in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Fam Jobigations of, Section 607.0505, Florida Statutes. 11. Pursuant to the pr or registered ag violed have of registered agent and title if applicable (NOTE: Flogistered Agent signature required when reinstating) (12/95)12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Change ☐ Addition TITLE 1. 1 TITLE NAME GREENBERG, JEFFREY M. 1.2 NAME CR2E034 STREET ADDRESS 11790 S.W. 89TH ST 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change Add:tion 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 City - ST - ZIP DELETE TITLE 3 1 TITLE Change Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADORESS CITY-S1-ZIP 3 4 CHY-ST-ZIP DELETE Change TITLE 4.1 TILE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - \$1 - ZIP 5 4 CITY-ST-ZIP DELETE Change Addition TITLE 6 1 TITLE NAME 6.2 NAME STREET ADDRESS CITY - S1 - ZIP 64 CITY - S1 - 719 14. Too hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 offector of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

JEFFREY M. GREENBERG

appears in Block 12 or Blo

SIGNATURE:

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ged, or on an attachment with an address.

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR