FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # S91130

(2)

GMO FINANCIAL, INC.

Principal Place of Business Mailing Address								
11790 S.W. 89 MIAMI FL 3319		11790 S.W. 89TH ST. Miami FL 33186-2165						
					3. Date Incorporated or 10/31/1991		ate of Last R 01/1996	leport
2. Principa! F	Place of Business	2a. Mailing Address 26			4. FEI Number 65-0293773			pplied For of Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status D	Desired	\$8.75	Additional equired
	City & State City & State				6. Election Campaign Fi	nancing		May Be
23	28				Trust Fund Contribution		Added	to Fees
Zip 24	Country 25	Zip 29	Country		8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No			
	Name and Address of Current	Registered Agent			10. Name and Address	of New Registered.	Agent	
	EENBERG, JEFFREY M.		81	Name			•	
11790 S.W. 89 ST.				Street Ad	ldress (P.O. Box Number is No	t Acceptable)		
MIAMI FL 33186			83	 				····
			84	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the abov	e-named co	prporation submits this stateme	ont for the purpose of	changing if	ts registered
agent ita	registered agent, or both, in the State or im familiar with, and accept the obligat	or Florida. Such change was tions of, Section 607.0505, F	aumorizea b Torida Statute	∤ tne corpor s.	ration's board of directors. I he	reby accept the app	ointment as	registered
SIGNATURE			····					
Signature, typed or printed name of registered agent and trie if applicable (NOTE 12. OFFICERSAND DIRECTORS			TE Registered Ag	ant signature rec	quired when rainstating) ADDITIONS/CHANGES	DATE TO OFFICERS AND	DIDECTOR	S 181 12
TITLE	& President	DELETE	1.1 TITLE			TO OTTIOENS AND	Change	Addition
NAME ·	GREENBERG, JEFFREY M.		1.2 NAME		BRESIDENT GREENBERG, JE	EFFREY M.		
STREET ADDRESS	11790 S.W. 89TH ST		1.3 STREF	T ADDRESS	11790 S.W. 89			
CITY-ST-ZIP	MIAMI FL		1.4 CiTY-5	ST-ZIP	MIAMI, FL	33186		
TITLE		DELETE	2.1 TITLE				Change	Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREET	ADDRESS				
CITY-ST-ZIP			2.4 CITY-	ST-ZIP				
TITLE	1	L DELETE	3.1 THILE				☐ Change	Addition
NAME			3.2 NAME	+				
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-S1-7IP			3.4. CITY -	ST-ZIP	······································			
TITLE		DELETE	4.1 TITLE	İ			☐ Change	L Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY - ST - ZIP		M AF. FFF	4.4 CITY - 9	7-2IP				
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET					
CITY-ST-ZIP		[m]	5.4 CITY-5	JT-ZIP				
TITLE		☐ DELETE	6.1 TITLE				L Change	Addition
NAME			6.2 NAME					-
STREET ADDRESS			6.3 STREET	ADDRESS				1

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

JEFFREY M. GREENBERG

1/13/97

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 among profession of 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 observation 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 or anged, or on an attachment with an address.

FILED

Jan 22 1997 8:00am

Secretary of State