


FILED

Secretary of State

01-21-1999 90065 001 ***150.00

FOR-PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S91130			
1. Corporation Name GMO FINANCIAL, INC.			
Principal Place of Business 11790 S.W. 89TH ST. MIAMI FL 33186-2166		Mailing Address 11790 S.W. 89TH ST. MIAMI FL 33186-2166	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 25 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent			
GREENBERG, JEFFREY M. 11790 SOUTHWEST 89TH ST MIAMI FL 33186			81 Name 82 Street Address 83 84 City
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation is the office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation and I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>			
12. OFFICERS AND DIRECTORS			
TITLE	P	<input type="checkbox"/> DELETE	
NAME	GREENBERG, JEFFREY M.		
STREET ADDRESS	11790 S.W. 89TH ST		
CITY-ST-ZIP	MIAMI FL		
TITLE		<input type="checkbox"/> DELETE	
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5.3 STREET ADDRESS			
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/31/1991

4. FEI Number	Applied For
65-0293773	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREENBERG, JEFFREY M.
-11790 SOUTHWEST 89TH ST
MIAMI FL 33186

81	Name
----	------

82	Street Address (P.O. Box Number is Not Acceptable)
----	--

83

84	City
----	------

85	Zip Code
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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	GREENBERG, JEFFREY M.	
STREET ADDRESS	11790 S.W. 89TH ST	
CITY-ST-ZIP	MIAMI FL	

TITLE		<input type="checkbox"/> DELETE
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STREET ADDRESS		
CITY- ST- ZIP		

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TITLE		<input type="checkbox"/> DELETE
NAME		
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CITY-ST-ZIP		

13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	

5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

SIGNATURE:  **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-99 305-271-8998
Date Daytime Phone #