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Apr 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # V37890 (3)
1. Corporation Name
G & E INTERNATIONAL, CORP.



Principal Place of Business
782 N.W. LE JEUNE RD.
SUITE #538
MIAMI FL 33126
US

Mailing Address
782 N.W. LE JEUNE RD.
SUITE #538
MIAMI FL 33126
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 782 N.W. LE JEUNE RD. SUITE #435		26 782 N.W. LE JEUNE RD.		05/19/1992	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 MIAMI, F.L. 33126		27 SUITE # 435		65-0340799	
City & State		City & State		Applied For	
23		28 MIAMI, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 33126		29 33126		[X] \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 USA		30 UGA		Trust Fund Contribution [] \$5.00 May Be Added to Fees	
8. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [] Yes [] No	

VASQUEZ, GONZALO
1594 SPRINGSIDE DRIVE
FORT LAUDERDALE FL 33328

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPS	1.1 TITLE	DPS
NAME	VASQUEZ, GONZALO	1.2 NAME	VASQUEZ, GONZALO
STREET ADDRESS	782 NW LE JEUNE DR. #538	1.3 STREET ADDRESS	782 N.W. LE JEUNE RD. #435
CITY-ST-ZIP	MIAMI FL 33128	1.4 CITY-ST-ZIP	MIAMI, FL 33126
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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.

CR2E034 (10/97)