

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000018020

Entity Name: G.V.P., INC.

FILED
Feb 04, 2005
Secretary of State

Current Principal Place of Business:

220 MIRACLE MILE
SUITE 203
CORAL GABLES, FL 33134

Current Mailing Address:

220 MIRACLE MILE
SUITE 203
CORAL GABLES, FL 33134

FEI Number: 65-1080332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

2121 PONCE DE LEON BLVD
SUITE 650
CORAL GABLES, FL 33134

New Mailing Address:

2121 PONCE DE LEON BLVD
SUITE 650
CORAL GABLES, FL 33134

Name and Address of Current Registered Agent:

BALOYRA, JOSE L ESQ
2665 SOUTH BAYSHORE DRIVE
SUITE 200
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

BALOYRA, JOSE L ESQ
2950 SW 27TH AVENUE
SUITE 300
MIAMI, FL 33133 US

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

02/04/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPVS () Delete
Name: PONCE, CARLOS
Address: 220 MIRACLE MILE SUITE 203
City-St-Zip: CORAL GABLES, FL 33134

Title: T () Delete
Name: ALEXANDER, SUEIRO CPA
Address: 220 MIRACLE MILE SUITE 203
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS (X) Change () Addition
Name: PONCE, CARLOS
Address: 2121 PONCE DE LEON BLVD STE 650
City-St-Zip: CORAL GABLES, FL 33134

Title: T (X) Change () Addition
Name: ALEXANDER, SUEIRO CPA
Address: 2121 PONCE DE LEON BLVD STE 650
City-St-Zip: CORAL GABLES, FL 33134

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: ALEXANDER SUEIRO

Electronic Signature of Signing Officer or Director

T

02/04/2005

Date