2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F98000002567

Entity Name

GE ENGINE SERVICES - MIAMI, INC.



Principal Place of Business

Mailing Address

4590 N.W. 36TH STREET MIAMI, FL 33152

P O BOX 2216 SCHENECTADY, NY 12301-2216 FILED May 04, 2004 8:00 am Secretary of State

05-04-2004 90192 007 ***150.00



DO NOT WRITE IN THIS SPACE

01072004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: R	egistered Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAT MELITA, BARBARA A 12 CORPORATE WOODS BLVD ALBANY, NY 12211	·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD VARESCHI, WILLIAM J 1 NEUMANN WAY CINCINNATI, OH 45215				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT FERNANDEZ-ANDES, RAY 490 N.W. 36TH STREET MIAMI, FL 33152		بر الله	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ERNEST, SCOTT ONE NEUMANN WAY CINCINNATI, OH 452156301	<u>.</u>		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HENDERSON, STEPHEN P ONE NEUMANN WAY CINCINNATI, OH 45215	,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUNNING, STEVEN ONE NEUMANN WAY CINCINNATI, OH_45215				
12. Thereby 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 as this construction and exemption and accurate and that my signature shall have the same legal effect as it made under path; that Lam an officer or director.					

indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/04 Date

(518)433-4338

Daytime Phone #

Report Date: 01/07/2004



Federal ID : 65-0784901

Tax Year : 2003 Rpt Mth : 12