## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000092999

Entity Name: G CONTRACTOR, CORP

**FILED** Mar 21, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

633 NE 167 ST., STE. 1112 633 NE 167 STREET NORTH MIAMI BEACH, FL 33162

**SUITE 1112** 

NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:** New Mailing Address:

5220 S UNIVERSITY DR 16300 NE 19 AVE.

SUITE C SUITE C-102 NORTH MIAMI BEACH, FL 33162 DAVIE, FL 33328

FEI Number: 42-1548727 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SILVA, LUIS F SILVA'S ENTERPRISE, INC. 5220 S UNIVERSITY DR 16300 NE 19 AVE. SUITE C-102 SUITE C

NORTH MIAMI BEACH, FL 33162 US DAVIE, FL 33328 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: FERNANDO SILVA 03/21/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change ( ) Addition DIAZ, HAYDEE Name: HUESO, GUSTAVO

Name: 1990 NE 163 ST STE 104 633 NE 167 STREET SUITE 1112 Address: Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: Title: (X) Change ( ) Addition () Delete

HUESO, GUSTAVO L Name: Name: DIAZ. HAYDEE

633 NE 167 ST., STE. 1112 633 NE 167 STREET SUITE 1112 Address: Address: NORTH MIAMI BEACH, FL 33162 NORTH MIAMI BEACH, FL 33162 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GUSTAVO HUESO PD 03/21/2006