

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000035567

FILED
Feb 15, 2006
Secretary of State

Entity Name: GABLES CONSULTING PARTNERS INC.

Current Principal Place of Business:

6000 SW 26 ST
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

6000 SW 26 ST
MIAMI, FL 33155

New Mailing Address:

FEI Number: 90-0062322 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CAPOTE, MICHAEL
6000 SW 26 ST
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAPOTE, MICHAEL
Address: 6000 SW 26 ST
City-St-Zip: MIAMI, FL 33155

Title: V () Delete
Name: PESANTES, CHRISTIAN
Address: 1115 MERRITT DR.
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAPOTE, MICHAEL
Address: 6000 SW 26 ST
City-St-Zip: MIAMI, FL 33155 US

Title: V (X) Change () Addition
Name: PESANTES, CHRISTIAN
Address: 4053 COLLETON COURT
City-St-Zip: TALLAHASSEE, FL 33211 US

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: MICHAEL CAPOTE

_____ Electronic Signature of Signing Officer or Director

MR.

02/15/2006

_____ Date