

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

**FILED
Mar 31, 2006 08:00 AM
Secretary of State**

DOCUMENT # P03000131653
1. Entity Name
GENERAL FLORIDA DETECTIVES INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4296 PALM AVENUE
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
HIALEAH, FL

City & State

4. FEI Number
20-0426497

Applied For
 Not Applicable

Zip
33012

Country

Zip

Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
FERNANDEZ, BERNARDO E

Street Address (P.O. Box Number is Not Acceptable)
20326 NW 52 CT, #657

City
OPALOCKA

FL

Zip Code
33055

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 *Bernardo E Fernandez* BERNARDO E FERNANDEZ 3/27/2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME FERNANDEZ, BERNARDO E
STREET ADDRESS 20326 NW 52 CT
CITY-ST-ZIP OPALOCKA, FL 33055

TITLE V
NAME FERNANDEZ, JANNYT
STREET ADDRESS 20326 NW 52 CT
CITY-ST-ZIP OPALOCKA, FL 33055

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information 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 on an attachment with an address, with all other like empowered.

SIGNATURE *Bernardo E Fernandez* BERNARDO E FERNANDEZ, PRES 3/27/2006 (305) 474-3264
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #