

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000041497

FILED  
Feb 12, 2008  
Secretary of State

Entity Name: GPM PLUS CORPORATION

## Current Principal Place of Business:

3900 OLD FIELD CROSSING DR  
1203  
JACKSONVILLE, FL 32223

## New Principal Place of Business:

5967 PAVILLION DR  
JACKSONVILLE, FL 32258

## Current Mailing Address:

P.O. BOX 57094  
JACKSONVILLE, FL 32241

## New Mailing Address:

FEI Number: 20-1071591      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION  
1261 E SAMPLE RD  
POMPANO BEACH, FL 33064      US

## Name and Address of New Registered Agent:

TAX HOUSE CORPORATION  
1100 S. FEDERAL HWY - 2ND FLOOR  
DEERFIELD BEACH, FL 33441      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: TAX HOUSE CORPORATION      02/12/2008  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P      ( ) Delete  
Name: POLASTRI, RAFAEL B  
Address: P.O. BOX 57094  
City-St-Zip: JACKSONVILLE, FL 32241

Title: V      ( ) Delete  
Name: BIDOIA, PATRICIA A  
Address: P.O. BOX 57094  
City-St-Zip: JACKSONVILLE, FL 32241

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RAFAEL B POLASTRI      PRES      02/12/2008  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date