

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000089252

FILED
Apr 11, 2005
Secretary of State

Entity Name: GENERAL LIQUIDATION SERVICES, INC.

Current Principal Place of Business:

3351 NORTHEAST 13 AVENUE
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

3351 NORTHEAST 13 AVENUE
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 65-0540849 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: PTD () Delete
Name: TAGLIONE, LAURA J
Address: 3351 NORTHEAST 13 AVENUE
City-St-Zip: POMPANO BEACH, FL

Title: VPSD () Delete
Name: GRASSO, SCOTT C
Address: 3351 NE 13TH AVE
City-St-Zip: POMPANO BEACH, FL

Title: V (X) Delete
Name: BLOCK, MICHAEL
Address: 3652 NORTH ANDREWS AVE
City-St-Zip: OAKLAND PARK, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPSD (X) Change () Addition
Name: GRASSO, SCOTT C
Address: 3351 NE 13TH AVE
City-St-Zip: POMPANO BEACH, FL

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LAURA TAGLIONE

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04/11/2005

Electronic Signature of Signing Officer or Director

_____ Date