

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000001206

FILED  
Feb 17, 2009  
Secretary of State

Entity Name: GASCOM, INC.

**Current Principal Place of Business:**

2800 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 222365  
HOLLYWOOD, FL 330222365

**New Mailing Address:**

FEI Number: 65-0807134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALACIOS, RAUL E  
16041 EMERALD COVE RD.  
WESTON, FL 33331 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: PD ( ) Delete  
Name: PALACIOS, RAUL E  
Address: 16041 EMERALD COVE RD.  
City-St-Zip: WESTON, FL 33331

Title: TD ( ) Delete  
Name: PALACIOS, RICHARD E  
Address: 348 E GARDEN COVE CIRCLE  
City-St-Zip: DAVIE, FL 33325

Title: VS ( ) Delete  
Name: PALACIOS II, RAUL E  
Address: 5100 SW 167TH AVENUE  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: RAUL E PALACIOS

PD

02/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date