	cipal Place of Business:			
6800 CODY ST				
HOLLYWOOD,	FL 33024			
Current Mai	ling Address:			
6800 CODY	ST.			
HOLLYWOC	D, FL 33024 US			
FEI Number: 20-4886326			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
TIRADO, GABR				
6800 CODY ST HOLLYWOOD,				
HOLLYWOOD,		registered office or regist	tered agent, or both, in the State of I	Florida.
HOLLYWOOD,	FL 33024 US	registered office or regis	tered agent, or both, in the State of I	^{Elorida.} 01/12/2017
HOLLYWOOD,	FL 33024 US I entity submits this statement for the purpose of changing its	registered office or regis	tered agent, or both, in the State of I	
HOLLYWOOD,	FL 33024 US I entity submits this statement for the purpose of changing its E: GABRIELA TIRADO Electronic Signature of Registered Agent	registered office or regis	tered agent, or both, in the State of I	01/12/2017
HOLLYWOOD, The above named SIGNATURE	FL 33024 US I entity submits this statement for the purpose of changing its E: GABRIELA TIRADO Electronic Signature of Registered Agent	registered office or regist	tered agent, or both, in the State of I	01/12/2017
HOLLYWOOD, The above named SIGNATURE Officer/Dire	FL 33024 US d entity submits this statement for the purpose of changing its E: GABRIELA TIRADO Electronic Signature of Registered Agent Ctor Detail :			01/12/2017
HOLLYWOOD, The above named SIGNATURE Officer/Dired Title	FL 33024 US d entity submits this statement for the purpose of changing its E GABRIELA TIRADO Electronic Signature of Registered Agent Ctor Detail : DPVP	Title	ST	01/12/2017
HOLLYWOOD, The above named SIGNATURE Officer/Dired Title Name	FL 33024 US d entity submits this statement for the purpose of changing its E GABRIELA TIRADO Electronic Signature of Registered Agent Ctor Detail : DPVP TIRADO, GABRIELA 6800 CODY ST.	Title Name Address	ST TIRADO, GABRIELA	01/12/2017
HOLLYWOOD, The above named SIGNATURE Officer/Dired Title Name Address	FL 33024 US d entity submits this statement for the purpose of changing its E GABRIELA TIRADO Electronic Signature of Registered Agent Ctor Detail : DPVP TIRADO, GABRIELA 6800 CODY ST.	Title Name Address	ST TIRADO, GABRIELA 6800 CODY ST.	01/12/2017

I hereby 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 all other like empowered.

SIGNATURE: GABRIELA TIRADO

Electronic Signature of Signing Officer/Director Detail

01/12/2017

FILED Jan 12, 2017 Secretary of State CC7528244952

Date

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000064911

Entity Name: G.B. MULTI SERVICES, INC.

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