

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000062769

**Entity Name:** GPM PLUS SERVICES CORPORATION

**Current Principal Place of Business:**

14728 FERN HAMMOCK  
JACKSONVILLE, FL 32258

**Current Mailing Address:**

14728 FERN HAMMOCK  
JACKSONVILLE, FL 32258 US

**FEI Number:** 27-3168970

**Certificate of Status Desired:** No

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

POLASTRI, RAFAEL  
14728 FERN HAMMOCK  
JACKSONVILLE, FL 32558 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name POLASTRI, RAFAEL  
Address 14728 FERN HAMMOCK  
City-State-Zip: JACKSONVILLE FL 32258

*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:** RAFAEL POLASTRI

**PRESIDENT**

**04/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date