

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 599604

FILED
May 16, 2006
Secretary of State

Entity Name: GABY TAXI NO. 5 CORPORATION

Current Principal Place of Business:

2017 S. OCEAN DR
APT 1401
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

2017 S. OCEAN DR
APT 1401
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 59-1933465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAZLIACH, ROBERT
2017 S. OCEAN DR.
APT. 1401
HALLANDALE, FL 33009 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAZLIACH, ROBERT,
Address: 2017 S.OCEAN DR.APT 1401
City-St-Zip: HALLANDALE, FL

Title: S (X) Delete
Name: MAZLIACH, YAEL,
Address: 2017 S.OCEAN DR.APT 1401
City-St-Zip: HALLANDALE, FL

Title: D (X) Delete
Name: MAZLIACH, ROBERT,
Address: 2017 S. OCEAN DR. APT 1401
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAZLIACH, ROBERT,
Address: 2017 S.OCEAN DR.APT 1401
City-St-Zip: HALLANDALE, FL 33009

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 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: ROBERT MAZLIACH

P

05/16/2006

Electronic Signature of Signing Officer or Director

Date