2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 25, 2005 8:00 am Secretary of State DOCUMENT # G49731 1. Entity Name 01-25-2005 90028 031 ***150.00 GILSON INVESTMENTS, INC. Principal Place of Business Mailing Address 6701 SW 120 ST 6701 SW 120 ST **MIAMI FL 33156 MIAMI FL 33156** 2. Principal Place of Business 6701 S.W. 130 3. Mailing Address 6701 S.W. 180 St Suite, Apt. #, otc. Suite, Apt. #, etc. CR2E034 (10/04) City & State City & State 4. FEI Number Applied For EL, 59-2303137 Miani <u>\; HM;</u> Not Applicable Country \$8.75 Additional 3156 5. Certificate of Status Desired 33156 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namé GILSON, GLEN W., II Street Address (P.O. Box Number is Not Acceptable) **6701 SW 120TH STREET MIAMI FL 33156** Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ST ☐ Defete TITLE Change ☐ Addition GILSON, GLEN W., II NAME MARKE STREET ADDRESS 6701 SW 120TH ST. STREET ADDRESS CHTY-ST-ZIP MIAMI FL CITY-ST-ZIP IIII F DP ☐ Delete TITLE ☐ Change ☐ Addition GILSON, EDITH ANN NAME NAME 6701 S W 120TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 00000 FL 33156 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME KARR, JEFFREY H NAME STREET ADDRESS 6701 S.W. 120 ST. STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33156** CITY-ST-ZIP ☐ Delete Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 12. Thereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, without other like empowered.

FILED

305-661-0180