

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J17707

FILED
Apr 10, 2006
Secretary of State

Entity Name: GABRIEL EXPORTS CORPORATION

Current Principal Place of Business:

4440 NW 74 AVE.
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

PO BOX 527664
MIAMI, FL 331527664

New Mailing Address:

FEI Number: 59-2723462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PULIDO, GABRIEL
4440 NW 74 AVE.
MIAMI, FL 33166 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: P () Delete
Name: PULIDO, GABRIEL,
Address: 4440 NW 74 AVE.
City-St-Zip: MIAMI, FL

Title: V () Delete
Name: PULIDO, GABRIEL E
Address: 4440 NW 74 AVE.
City-St-Zip: MIAMI, FL

Title: V () Delete
Name: PULIDO, FERNANDO
Address: 4440 NW 74 AVE.
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: PULIDO, JANETH
Address: 4440 NW 74 AVE.
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: PULIDO, ALBA
Address: 4440 NW 74 AVE.
City-St-Zip: MIAMI, FL

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:

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: GABRIEL PULIDO

P

04/10/2006

Electronic Signature of Signing Officer or Director

Date