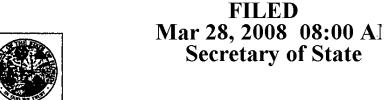
## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # J94981** G.A.C. BUILDING SERVICES, INC.



1. Entity Name

Principal Place of Business

**1658 VICTORIA POINTE LANE** FORT LAUDERDALE, FL 33327 Mailing Address

PO BOX 268073

FORT LAUDERDALE, FL 33326



DO	NOT	<b>WRITE</b>	IN	<b>THIS</b>	SPACE	4. FE

02262008 No Chg-P CR2E034 (11/05) I Number Applied For 65-0006266 Not Applicable 

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAMARGO, ALBA I 1658 VICTORIA POINTE LANE FORT LAUDERDALE, FL 33327

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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.										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
	E NOW!!! FEE IS \$150.00 ny 1, 2008 Fee will be \$550.00			\$5.00 May Be Added to Fees	000000874480 04/10/08-80120-013 158.75					
10.	OFFICERS AND DIREC	TORS		• .						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CAMARGO, GABRIEL A. 1658 VICTORIA POINTE LN WESTON, FL 33327									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CAMARGO, ALBA I. 1658 VICTORIA POINTE LN WESTON, FL 33327									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,			DO	NOT WRI	TE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPAC	E				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			•							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CRACOLES (N. 1944)			**************************************		·				
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 addiess, with an other like empowered.										