

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90068 046 ***158.75

DOCUMENT # L35579	
1. Entity Name G.E.C. ASSOCIATES, INC.	

Principal Place of Business 12208 SW 129 CT MIAMI FL 33186 US	Mailing Address 12208 SW 129 CT B-230 MIAMI FL 33186 US
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2. Principal Place of Business 9487 N.W. 12th STREET	3. Mailing Address 9487 N.W. 12th STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E034 (10/05)

City & State DORAL, FL	City & State DORAL, FL
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4. FEI Number 65-0162997	Applied For ☐ Not Applicable
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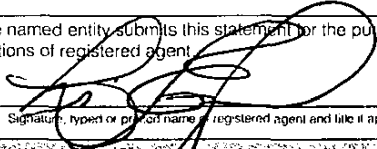
Zip 33172	Country USA	Zip 33172	Country USA
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5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PAREDES, FAUSTINO J 12208 SW 129 CT MIAMI FL 33186	
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7. Name and Address of New Registered Agent	
Name LUIS N. ENRIQUEZ	
Street Address (P.O. Box Number is Not Acceptable) 9487 N.W. 12th STREET	
City MIAMI	FL Zip Code 33172

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  **2/6/2006**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required upon re-registration) **LUIS N. ENRIQUEZ, PRESIDENT** DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE P	☒ Delete
NAME PAREDES, FAUSTINO	
STREET ADDRESS 15552 SW 71 ST.	
CITY-ST-ZIP MIAMI FL 33193	
TITLE V	☒ Delete
NAME ENRIQUEZ, LUIS N	
STREET ADDRESS 3851 SW 63 AVE.	
CITY-ST-ZIP MIAMI FL 33155	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	☒ Change ☒ Addition
NAME ENRIQUEZ, LUIS N.	
STREET ADDRESS 451 SW 87th COURT	
CITY-ST-ZIP MIAMI, FL 33155	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 address with an officer like empowered.

SIGNATURE:  **2/6/2006** (305) 994-2150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **LUIS N. ENRIQUEZ, PRESIDENT** Date Daytime Phone #