

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90057 005 ***158.75

DOCUMENT # L51117 1. Entity Name G.M. SELBY & ASSOCIATES, INC.					
Principal Place of Business 7400 S.W. 50TH TERRACE SUITE 304 MIAMI, FL 33155 US			Mailing Address 7400 S.W. 50TH TERRACE SUITE 304 MIAMI, FL 33155 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0178155	
5. Certificate of Status Desired ☒				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent ZADIKOFF, MARINA N. 6540 SW 131 STREET MIAMI, FL 33156				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ZADIKOFF, GERALD 6540 SW 131 STREET MIAMI, FL 33156	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	C, D ZADIKOFF, GERALD 6540 S.W. 131 ST. MIAMI, FL. 33156
				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTCD ZADIKOFF, MIRIAM-MARINA 6540 SW 131 STREET MIAMI, FL 33156	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD, T ZADIKOFF, MIRIAM MARINA 6540 S.W. 131 ST. MIAMI FL. 33156
				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ATTAR, SIMY M 7400 SW 50TH TERRACE #100 MIAMI, FL 33155	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D, S ATTAR, SIMY MAMIE 7400 S.W 50 TER, #304 MIAMI, FL. 33155
				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete				
12. I hereby 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, with all other like empowered.					
SIGNATURE: _____ M. ZADIKOFF					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
4/11/05 305-666-5775					
Date Daytime Phone #					