

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000201

FILED
Jan 26, 2006
Secretary of State

Entity Name: GABRIELE G'S, INC.

Current Principal Place of Business:

8418 N. GRADY
TAMPA, FL 33614 US

New Principal Place of Business:

8418 N. GRADY AVE
TAMPA, FL 33614 US

Current Mailing Address:

8418 N. GRADY
TAMPA, FL 33614

New Mailing Address:

8418 N. GRADY AVE
TAMPA, FL 33614

FEI Number: 59-3355974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUSLIN, HARVEY P
1905 W. KENNEDY BLVD.
TAMPA, FL 33606 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

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MORALES, GABRIEL
Address: 8418 N. GRADY
City-St-Zip: TAMPA, FL 33614

Title: D () Delete
Name: ARNOLD, DONALD
Address: 10609 N 27TH STREET
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: HELM, HARRELL JAMES
Address: 13409 JOAN DR
City-St-Zip: TAMPA, FL 33617

Title: S () Delete
Name: HAND, WILDA E
Address: 10609 N 27 ST
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: FUERTES, ISABEL
Address: 8401 LAKE MALINA WAY
City-St-Zip: TAMPA, FL 33614

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GABRIEL MORALES

P

01/26/2006

Electronic Signature of Signing Officer or Director

Date