


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000005053 1. Entity Name GABRIEL VERA JANITORIAL SERVICES, INC.	
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Principal Place of Business 6086 FOREST HILL BLVD., APT. 109 WEST PALM BEACH, FL 33415	Mailing Address 6086 FOREST HILL BLVD., APT. 109 WEST PALM BEACH, FL 33415
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04262006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0973476	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent VERA, GABRIEL 6086 FOREST HILL BLVD., APT. 109 WEST PALM BEACH, FL 33415

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERA, GABRIEL 6086 FOREST HILL BLVD., APT. 109 WEST PALM BEACH, FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASSINI, CHRISTIAN 1000 S. MILITARY TRAIL WEST PALM BEACH, FL 33415
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/09/06-BD104-001 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 address, with all other like empowered.

SIGNATURE: Gabriel Vera

04-26-06 (56)8762699