

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000051217

FILED
Apr 29, 2006
Secretary of State

Entity Name: GENERAL RELIABLE SERVICES, INC.

Current Principal Place of Business:

1100 HOLLOW BROOK LANE
MALABAR, FL 32950

New Principal Place of Business:

353 BRECKENRIDGE CIRCLE SOUTH EAST
PALM BAY, FL 32909 US

Current Mailing Address:

1100 HOLLOW BROOK LANE
MALABAR, FL 32950

New Mailing Address:

353 BRECKENRIDGE CIRCLE SOUTH EAST
PALM BAY, FL 32909 US

FEI Number: 65-1030256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALVES, ADRIANO M
Address: 1100 HOLLOW BROOK LANE
City-St-Zip: MALABAR, FL 32950

Title: VPSD () Delete
Name: DE MATOS ALVES, ELAINE
Address: 1100 HOLLOW BROOK LANE
City-St-Zip: MALABAR, FL 32950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALVES, ADRIANO M
Address: 353 BRECKENRIDGE CIRCLE SOUTH EAST
City-St-Zip: PALM BAY, FL 32909 US

Title: VPSD (X) Change () Addition
Name: DE MATOS ALVES, ELAINE
Address: 353 BRECKENRIDGE CIRCLE SOUTH EAST
City-St-Zip: PALM BAY, FL 32909 US

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

SIGNATURE: ADRIANO M MORAIS

PD

04/29/2006

Electronic Signature of Signing Officer or Director

Date