



FILED
Jan 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000001923				Secretary of State	
1. Entity Name GIFTS INTERNATIONAL, INC.					
Principal Place of Business 7275 NW 68 ST #8 MIAMI, FL 33166		Mailing Address 9725 NW 52ND ST #2093 MIAMI, FL 33166			
DO NOT WRITE IN THIS SPACE					
				01092004 No Chg-P CR2E034 (10/03)	
				4. FEI Number 65-1078533	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARVAJAL, STELIA 7275 NW 68 ST # 8 MIAMI, FL 33166				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 <u><i>Stelia Carvajal</i></u> (NOTE: Registered Agent signature required when reinstating) <u><i>Jan. 13/08</i></u> DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		PD CARVAJAL, STELIA F 7275 N.W. 68TH ST., STE.#8 MIAMI, FL 33166		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		VD OCHOA, JOSE F 7275 N.W. 68TH ST., STE. #8 MIAMI, FL 33166			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u><i>Stelia Carvajal</i></u> <u><i>Jan. 13/08</i></u> DATE					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					