

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 15, 2003 8:00 am**  
**Secretary of State**

05-15-2003 90117 005 \*\*\*150.00

DOCUMENT # *PO1000047796*



1. Entity Name  
*GILLETTE SERVICES, INC.*

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
*1030 S. Federal Hwy.*

3. Mailing Address  
*1030 S. Federal Hwy.*

Suite, Apt. #, etc.  
*#123*

City & State  
*Delray Beach, Fl.*

Zip  
*33483*

Country  
*U.S.A.*

DO NOT WRITE IN THIS SPACE

4. FEI Number  
*05-1108137*

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
*Beverly Anderson*

Street Address (P.O. Box Number is Not Acceptable)  
*46 Gull way*

City  
*Boynton Bch. FL*

Zip Code  
*33436*

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 *Beverly Anderson* DATE *5/12/03*

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE  
*OWNER PRESIDENT*  
NAME  
*BEVERLY ANDERSON*  
STREET ADDRESS  
*46 Gull way*  
CITY-ST-ZIP  
*Boynton Bch. Fl. 33436*

TITLE  
*SECRETARY*  
NAME  
*LORRAINE WALKER*  
STREET ADDRESS  
*1534 Stonehaven Dr.*  
CITY-ST-ZIP  
*Boynton Bch, Fl. 33436*

TITLE  
*Vice President*  
NAME  
*Wayne Gillette*  
STREET ADDRESS  
*7 yial de casa Norte*  
CITY-ST-ZIP  
*Boynton Bch. Fl. 33436*

TITLE  
*TREASURER*  
NAME  
*Wanna Beverly Anderson*  
STREET ADDRESS  
*46 Gull way*  
CITY-ST-ZIP  
*Boynton Bch Fl. 33436*

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Beverly Anderson* DATE *5/12/03*

CR2E034B (12/02)

90135296  
PO1000047776

Gillette Service Inc.

Attachment

1030 S. Federal Hwy.

#123

Delray Beach, Fl. 33483

Division of Corporations

P.O. Box 1500

Tallahassee, Fl. 32302

5-12-03

Dear Sirs

Enclosed please find a completed VBR for the above referenced company. We did not receive this year's VBR in the mail so we called on 5-7-03 and spoke to Tom who sent us this form and requested we send it in immediately with the \$150.00 fee.

Thanks for the attention to the matter.

Sincerely,  
Beverly Anderson  
President.