

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 04, 2005 8:00 am**  
**Secretary of State**

03-04-2005 90090 001 \*\*\*159.00

DOCUMENT # P01000090636

1. Entity Name

GP KITCHEN CABINETS, INC.



Principal Place of Business

10000 NW 80 CT  
# 2204  
HIALEAH GARDENS FL 33016

Mailing Address

10000 NW 80 CT  
# 2204  
HIALEAH GARDENS FL 33016

2. Principal Place of Business

12401 W Okeechobee Road  
Suite, Apt. #, etc.  
#50

3. Mailing Address

12401 West Okeechobee Road  
Suite, Apt. #, etc.  
#50

City & State

Hialeah Gardens FL

City & State

Hialeah Gardens FL

Zip

33018

Country

Zip

33018

Country



1st MOORE

CR2E034 (10/04)

4. FEI Number

65-1138811

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PLACERES, GERARDO  
10000 NW 80 CT  
APT #2238  
HIALEAH GARDENS FL 33016

7. Name and Address of New Registered Agent

Name  
PLACERES, GERARDO  
Street Address (P.O. Box Number is Not Acceptable)  
12401 W Okeechobee Road  
Lot #50  
City  
Hialeah Gardens FL Zip Code  
33018

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee Will Be \$550.00**  
**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	PVST	<input checked="" type="checkbox"/> Delete
NAME	PLACERES, GERARDO	
STREET ADDRESS	10000 NW 80 COURT	
CITY-ST-ZIP	HIALEAH GARDENS FL 33016	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PLACERES, GERARDO	
STREET ADDRESS	10000 NW 80 COURT	
CITY-ST-ZIP	HIALEAH GARDENS FL 33016	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PVST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PLACERES, GERARDO	
STREET ADDRESS	12401 W Okeechobee Road Lot #50	
CITY-ST-ZIP	Hialeah Gardens FL 33018	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PLACERES, GERARDO	
STREET ADDRESS	12401 W Okeechobee Road Lot #50	
CITY-ST-ZIP	Hialeah Gardens FL 33018	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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)(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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Gerardo Placeres*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/2005 C (305) 285-0065  
H (305) 456-1093

Date

Daytime Phone #