

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000027351

FILED
Mar 11, 2008
Secretary of State

Entity Name: GABRIWORKS HOSPITALITY CORP.

Current Principal Place of Business:

2295 S. HIAWASSEE RD
SUITE 306
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

2295 S. HIAWASSEE RD
SUITE 306
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 45-0505213 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 NORTH ORANGE AVENUE
SUITE 1400
ORLANDO, FL 32801 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: P () Delete
Name: GABRI, DAVID G
Address: 2295 S. HIAWASSEE RD SUITE 306
City-St-Zip: ORLANDO, FL 32835

Title: S () Delete
Name: GABRI, PATRICIA
Address: 2295 S. HIAWASSEE RD SUITE 306
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID GABRI

CEO

03/11/2008

Electronic Signature of Signing Officer or Director

_____ Date