## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000050060

City-St-Zip: AVENTURA, FL 33180

Entity Name: GROUP SERVICE INTERNATIONAL INC.

FILED Apr 28, 2007 Secretary of State

	mer ortoor outwice invitation that	V/ NE, 1140.		
Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
	12TH AVENUE O BEACH, FL 33069			
Current Mailing Address:		New Mailing Addres	s:	
20111 NF	27 COURT			
K106				
AVENTUR	RA, FL 33180			
FEI Number	: FEI Number Applied For (	( ) FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		nt: Name and Address o	Name and Address of New Registered Agent:	
BRAVO, DORIS 20111 NE 27 COURT		BRAVO, DORIS 5600 COLLINS AVE	5600 CÓLLINS AVE	
KI106 AVENTUR	RA, FL 33180 US		6Y MIAMI BEACH, FL 33140 US	
	enamed entity submits this statement fo e of Florida. RE:	ir the purpose of changing its registere	04/28/2007	
	Electronic Signature of Registere	ed Agent	Date	
Election Ca	mpaign Financing Trust Fund Contribution (	).		
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D () Delete BRAVO, DORIS 20111 NE 27 COURT . #K106 AVENTURA, FL 33180	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete DIAZ, ALBERTO 20111 NE 27 COURT . #K106 AVENTURA, FL 33180	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete PISANO, MARIO 20111 NE 27 COURT . #K106 AVENTURA, FL 33180	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete LAMAS, PAULA 20111 NE 27 COURT . K106 AVENTURA, FL 33180	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () Delete LAMAS, DORIS 20111 NE 27 COURT . #K106	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE:	DORIS BRAVO	D	04/28/2007