2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P03000079780  1. Entity Name  GAR LATHING INC.					Mar 16, 2005 08:00 AN Secretary of State					
ļ										
1	ce of Business	Mailing Address								
10010 SW MIAMI FL 3		10010 SW 13 TERR MIAMI FL 33174								
2. Principal	Place of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1:	st MOORE	CR2E034 (10	)/04)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
City & State		City & State		4. FEI Numl	<sup>ber</sup> 56-2376472	!	<del></del>	oplied For of Applicable		
Zip	Country	Zip	Zip Country		5. Certificat	e of Status Desired		75 Ado	ditional	
6. Name and Address of Current Registered Agent				None	7. Name an	d Address of New R	egistered Ager	rt		
ROI	LLINS, EUGENE 010 SW 13 TERR	,	,		Name Street Address (P.O. Box Number is Not Acceptable)					
	AMI FL 33174				<del></del>	·	<u> </u>		<del></del>	
				City			FL	Zip Code	e	
8. The above the obligation	e named entity submits this statement trions of registered agent.  Law Roll Signally, typed or printed name of registered age			d Agent signature required		oth, in the State of Flo	(	iar with,	and accept	
After	FILE NOW!!! FEE IS \$150.00 r May 1, 2005 Fee Will Be \$550.0 k Payable to Florida Department			· · · · · · · · · · · · · · · · · · ·	<u> </u>	9. Election Campa Trust Fund Conf	-		00 May Be ad to Fees	
10,	Till 17 17 17 17 17 17 17 17 17 17 17 17 17	D DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	CERS AND DIF	ECTOR	5 IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	D ROLLINS, EUGENE 10010 SW 13 TERR MIAMI FL 33174	Delete	4			U00000264 03/16/05-80(		Change 50 . OC	Addition	
TITLE		Delete	TITLE	F	<del></del>	· · · · · · · · · · · · · · · · · · ·		Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP				E ET ADDRESS S1-ZIP		-				
TITLE		☐ Delete	TITLE		· <del></del>	<del>. ,                                     </del>		Change	Addition	
NAME SYREET ADDRESS CITY-ST-ZIP				E ET ADDRESS -ST-ZIP						
TITLE	<u> </u>	☐ Delete	TITLE		·			Change	Addition	
NAME STREET ADDRESS CITY ST-ZIP				E ET ADDRESS - SI - ZIP						
TITLE		☐ Delete	TITLE	····				Change	Addition	
NAME STREET ADDRESS CITY - ST - ZIP				ET ADDRESS						
TITLE		☐ Delete	TITLE	-ST-ZIP	<del></del>	<del></del>		Change	☐ Addition	
NAME STREFT ADDRESS CITY+ST-ZIP	-		NAM! STRE	1			J	mnyv	rauntoti	
indicated of the co	certify that the information supplied widon this report or supplemental report roporation or the receiver or trustee em, or on an attachment with an address	is true and accurate and that powered to execute this report	my signat Las requir	tura shall baya tha i	nama lagal affa	of an if muda under a	بمشسما عمطة بطاحم		سمة مستام سم	

FILED