FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90016 042 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000082531

1. Entity Name
GK GABRIEL HOSTS, INC

40018709

Principal Place of Business	Mailing Address
6104 PALMA DEL MAR, BLVD 114 SAINT PETESBURG, FL 33715 US	6104 PALMA DEL MAR, BLVD 114 SAINT PETESBURG, FL 33715 US

01292005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
5001 GULF BLVD.	7310 SUNSHINE LANE
Suite, Apt. #, etc.	Suite, Apt. #, etc. APT # 111
City & State: ST. PETERSBURG BEACH, FL	City & State: ST. PETERSBURG, FL
Zip: 33706 Country:	Zip: 33711 Country:

4. FEI Number: 27-0064073 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GUIRGUIS, GEORGE 6104 PALMA DEL MAR BLVD 114 SAINT PETESBURG, FL 33715	Name: GUIRGUIS, GEORGE Street Address (P.O. Box Number is Not Acceptable): 7310 SUNSHINE LANE #111 City: ST. PETERSBURG FL Zip Code: 33711

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 ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GUIRGUIS, GEORGE 6104 PALMA DEL MAR BLVD SAINT PETERSBURG, FL 33715 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 7310 SUNSHINE LANE #111 ST. PETERSBURG, FL 33711
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: X George Guirguis — 2-13-05 — (727) 867 8143
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #