

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000119394

FILED
Jan 08, 2006
Secretary of State

Entity Name: GARY FARKAS INSTALLATION & SERVICES, INC.

Current Principal Place of Business:

2557 N. TAMIAMI TRAIL
LOT 62
N. FORT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

2557 N. TAMIAMI TRAIL
LOT 62
N. FORT MYERS, FL 33903

New Mailing Address:

FEI Number: 20-0326063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARKAS, WENDY
2557 N. TAMIAMI TRAIL
N. FORT MYERS, FL 33903 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: FARKAS, GARY
Address: 2557 N. TAMIAMI TRAIL
City-St-Zip: N. FORT MYERS, FL 33903

Title: VP () Delete
Name: FARKAS, WENDY
Address: 2557 N. TAMIAMI TRAIL
City-St-Zip: N. FORT MYERS, FL 33903

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 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: GARY FARKAS

VP

01/08/2006

Electronic Signature of Signing Officer or Director

Date