2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 02, 2006 08:00 AF Secretary of State

ANNUAL REPURT		
DOCUMENT # P0400023316 1. Entity Name GOURILUK SERVICES, INC.		
Principal Place of Business	Mailing Address	
3937 OMEGA LANE Sarasota, FL 34235	3937 OMEGA LANE Sarasota, Fl. 34235	

02202006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0690752 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GOURILUK, GREGORY A DO NOT WRITE 3937 OMEGA LANE SARASOTA, FL 34235 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE GOURILUK, GREGORY A NAME 3937 OMEGA LANE STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34235 100000452672 NAME 113/13/106-80003-011 150.0T STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

CITY-ST-ZIP

SIGNATURE: GREG GOURILUR 02/27/06 (941) 366-8102
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR
Days The Printed A