

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000031174

1. Entity Name
GILAR CORPORATION



Principal Place of Business
2000 S.W. 13TH AVENUE
MIAMI, FL 33145

Mailing Address
2000 S.W. 13TH AVENUE
MIAMI, FL 33145

FILED
Jul 15, 2008 08:00 AM
Secretary of State



07092008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1088789

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARRIAZA, GILBERTO
2000 S.W. 13TH AVENUE
MIAMI, FL 33145

DO NOT WRITE
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 renewing)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ARRIAZA, GILBERTO M
STREET ADDRESS	2000 S.W. 13TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	V
NAME	ARRIAZA, GILBERTO J
STREET ADDRESS	2000 S.W. 13TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	S
NAME	ARRIAZA, AIDA V
STREET ADDRESS	2000 S.W. 13TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	T
NAME	PERIS, MARIA V
STREET ADDRESS	2000 S.W. 13TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/15/08-80008-007 150.00

DO NOT WRITE
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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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Maria A. Peris 7/15/08 305 637 3600