

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000034222

Entity Name: D'GILS CORPORATION

FILED  
Feb 22, 2007  
Secretary of State

## Current Principal Place of Business:

4290 10TH AVENUE NORTH  
105  
LAKE WORTH, FL 33461

## New Principal Place of Business:

## Current Mailing Address:

4290 10TH AVENUE NORTH  
105  
LAKE WORTH, FL 33461

## New Mailing Address:

FEI Number: 90-0146705

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GILL, JAIME  
5243 BLUEBERRY HILL AVE  
LAKE WORTH, FL 33463 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: GILL, JAIME  
Address: 5243 BLUEBERRY HILL AVE  
City-St-Zip: LAKE WORTH, FL 33463

Title: VP (X) Delete  
Name: GIL, PLUTARCO E  
Address: 5357 BLUEBERRY HILL AVE  
City-St-Zip: LAKE WORTH, FL 33463

Title: TR (X) Delete  
Name: GIL, VICTOR H  
Address: 5363 BLUEBERRY HILL AVE  
City-St-Zip: LAKE WORTH, FL 33463

Title: S ( ) Delete  
Name: GIL, FELIPE A  
Address: 5357 BLUEBERRY HILL AVE  
City-St-Zip: LAKE WORTH, FL 33463

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: GILL, JAIME  
Address: 5243 BLUEBERRY HILL AVE  
City-St-Zip: LAKE WORTH, FL 33463

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: GIL, FELIPE A  
Address: 5357 BLUEBERRY HILL AVE  
City-St-Zip: LAKE WORTH, FL 33463

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: JAIME GILL

P

02/22/2007

Electronic Signature of Signing Officer or Director

Date