

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000064926

FILED
Apr 26, 2007
Secretary of State

Entity Name: GULF COAST GROUND SERVICES, INC.

Current Principal Place of Business:

10902 SUMMERTON DR
RIVERVIEW, FL 33569

New Principal Place of Business:

5445 N 59TH ST
TAMPA, FL 33610

Current Mailing Address:

P.O. BOX 1828
RIVERVIEW, FL 335681828

New Mailing Address:

FEI Number: 20-1018000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORALES, EFRAIN
10902 SUMMERTON DR
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

MORALES, EFRAIN
5445 N 59TH ST
TAMPA, FL 33610 US

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: EFRAIN MORALES

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORALES, EFRAIN
Address: P.O. BOX 1828
City-St-Zip: RIVERVIEW, FL 335681828

Title: S () Delete
Name: TORRES, ADA
Address: P.O. BOX 1828
City-St-Zip: RIVERVIEW, FL 335681828

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: EFRAIN MORALES

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date