

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000076899

FILED
May 12, 2005
Secretary of State

Entity Name: GIFT SHOP INTERNATIONAL INC.

Current Principal Place of Business:

P.O. BOX 430865
MIAMI, FL 33243

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 430865
MIAMI, FL 33243

New Mailing Address:

FEI Number: 20-1123478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOCANEGRA, INGRID
8801 SW 82ND AVE.
MIAMI, FL 33156 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

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOCANEGRA, INGRID
Address: P.O. BOX 430865
City-St-Zip: MIAMI, FL 33243

Title: V () Delete
Name: BOCANEGRA, JUAN
Address: P.O. BOX 430865
City-St-Zip: MIAMI, FL 33243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BOCANEGRA, INGRID
Address: P.O. BOX 430865
City-St-Zip: MIAMI, FL 33243

Title: VD (X) Change () Addition
Name: BOCANEGRA, JUAN
Address: P.O. BOX 430865
City-St-Zip: MIAMI, FL 33243

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: INGRID BOCANEGRA

PD

05/12/2005

Electronic Signature of Signing Officer or Director

Date