

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000095668

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** PRODUCTS UNLIMITED OF GAINESVILLE, INC.

**Current Principal Place of Business:**

230 NE 16TH AVENUE  
GAINESVILLE, FL 32609

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5152  
GAINESVILLE, FL 326275152 US

**New Mailing Address:**

**FEI Number:** 77-0639279

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MEEKS, CORO  
230 NE 16TH AVENUE  
GAINESVILLE, FL 32609 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: MEEKS, IRMA C  
Address: 2325 NW 42ND AVE  
City-St-Zip: GAINESVILLE, FL 32605

Title: V ( ) Delete  
Name: MENDOZA, CARLOS A  
Address: 2325 NW 42ND AVE  
City-St-Zip: GAINESVILLE, FL 32605

Title: ST ( ) Delete  
Name: MEEKS BORJAS, AKEMI V  
Address: 907 NW 11TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: CARLOS A MENDOZA

VP

05/01/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date