2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000136316

1. Entity Name
GEZIM TOSKA INC.



Principal Place of Business

7601 INDIA AVE JACKSONVILLE, FL 32211 Mailing Address

7601 INDIA AVE JACKSONVILLE, FL 32211

FILED Feb 09, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01282007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Sample Sa

6. Name and Address of Current Registered Agent

TOSKA, GEZIM 7601 INDIA AVE JACKSONVILLE, FL 32211

DO NOT WRITE IN THIS SPACE

	enamed entity submits this statement for the plicons of registered agent.	ourpose of changing its regist	ered office or registered agent, or	both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	il applicable (NOTE, Regist	ered Agent signature required when reinstating) DATE
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Fir Trust Fund Contribution	- - +	n2/16/07-80035-007 150.00
10.	0. OFFICERS AND DIRECTORS			The second of th
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP TOSKA, GEZIM 7601 INDIA AVE JACKSONVILLE, FL 32211			

DV TOSKA, DANIELA NAME STREET ADDRESS 7601 INDIA AVE CITY-ST-ZIP JACKSONVILLE, FL 32211 TITLE NAME STREET ADDRESS DO NOT WRITE CITY+ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 all-other like empowered.

SIGNATURE:

SHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/07/07-X

Daytime Phone #