

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000022784

FILED
May 01, 2006
Secretary of State

Entity Name: BILLY & GUS, INC.

Current Principal Place of Business:

4219 WORTHINGTON PLACE
MASCOTTE, FL 34753 US

New Principal Place of Business:

334 EAST MYERS BOULEVARD
MASCOTTE, FL 34753 US

Current Mailing Address:

4219 WORTHINGTON PLACE
MASCOTTE, FL 34753 US

New Mailing Address:

334 EAST MYERS BOULEVARD
MASCOTTE, FL 34753 US

FEI Number: 20-2349180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIOKIS, BASILEIOS S
4219 WORTHINGTON PLACE
MASCOTTE, FL 34753 US

Name and Address of New Registered Agent:

JONES, BRET
700 ALMOND STREET
CLERMONT, FL 34711 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: BRET JONES

05/01/2006

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: DPT () Delete
Name: SIOKIS, BASILEIOS S
Address: 4219 WORTHINGTON PLACE
City-St-Zip: MASCOTTE, FL 34753 US

Title: C,VP () Delete
Name: SIOKIS, KONSTANTINOS
Address: 4219 WORTHINGTON PLACE
City-St-Zip: MASCOTTE, FL 34753 US

Title: S (X) Delete
Name: PHILLOS, SERAPHIM T
Address: 77 ARDEN DRIVE
City-St-Zip: NEWPORT NEWS, VA 23601 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: SIOKIS, BASILEIOS S
Address: 334 EAST MYERS BOULEVARD
City-St-Zip: MASCOTTE, FL 34753 US

Title: DVPT (X) Change () Addition
Name: JONES, JON
Address: 334 EAST MYERS BOULEVARD
City-St-Zip: MASCOTTE, FL 34753 US

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: BASILEIOS S. SIOKIS

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date