


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 28, 2008 8:00 am**  
**Secretary of State**

07-28-2008 90032 037 \*\*\*550.00

**DOCUMENT # P05000029428**

1. Entity Name  
**SPECIAL GIFT, INC.**




Principal Place of Business      Mailing Address

**865 EAST 8TH STREET**      **865 EAST 8TH STREET**  
**HIALEAH, FL 33010**      **HIALEAH, FL 33010**

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600930



07182008    No Chg-P    CR2E034 (11/05)

4. FEI Number 16-1717820	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.**  
**1840 SW 22ND ST.**  
**4TH FLOOR**  
**MIAMI, FL 33145**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD GUTIERREZ, FELIX M 865 EAST 8TH STREET HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GARCIA, DIANA 865 EAST 8TH STREET HIALEAH, FL 33010
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:**       Date: **7-19-08**      Daytime Phone #: **(305) 877-888**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR