2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140793

FILED Apr 24, 2009 Secretary of State

Entity Name: GARRATT & LAU SUB'S OF CAPE CORAL INCORPORATED

Current Principal Place of Business:		New Principal Place of Business:		
	15TH AVE RAL, FL 33991			
Current Mailing Address:		New Mailing Address:		
	15TH AVE RAL, FL 33991			
FEI Number	r: 26-0130217	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
	Γ, DAVID 15TH AVE RAL, FL 33991	US		
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	ubmits this statement for the լ	ourpose of changing its registere	ed office or registered agent, or both,
in the Stat	e of Florida. RE:	ubmits this statement for the p		ed office or registered agent, or both, Date
in the Stat SIGNATU	e of Florida. * RE:Electroni			
in the Stat SIGNATU Election Ca	e of Florida. * RE:Electroni	c Signature of Registered Agr	ent	
in the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT	c Signature of Registered Ag Trust Fund Contribution (). CORS: Delete D AVE	ent	Date
in the Stat SIGNATU Election Ca	e of Florida. RE: Electroni mpaign Financing S AND DIRECT PD () GARRATT, DAVI 1709 SW 15TH / CAPE CORAL, F	c Signature of Registered Agr Trust Fund Contribution (). CORS: Delete D AVE IL 33991 Delete ERT V-#1021	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: DAVIG GARRATT P 04/24/2009