

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2006 8:00 am
Secretary of State

07-21-2006 90027 044 ***150.00

DOCUMENT # P05000165445

1. Entity Name
THE GORB, INC.



Principal Place of Business
8510 SW 52ND AVE.
MIAMI, FL 33143 US

Mailing Address
8510 SW 52ND AVE.
MIAMI, FL 33143 US

40100357



2. Principal Place of Business

921 NW 82ND AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07032006

Chg-P

CR2E034 (11/05)

City & State

MIAMI FL

City & State

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip
33124

Country
DADE

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOORD, LEONARD
8510 SW 52ND AVE.
MIAMI, FL 33143

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
BOORD, LEONARD
8510 SW 52ND AVE.
MIAMI, FL 33143 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition


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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 3, 2006 305-400-1509
Date Daytime Phone #

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000165445	
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ATTACHMENT

40100357

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--	--

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

07032006 Chg-P CR2E034 (11/05)

4. FEI Number	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent	
BOORD, LEONARD 8510 SW 52ND AVE. MIAMI, FL 33143	
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Name	
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City FL Zip Code	

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BOORD, LEONARD 8510 SW 52ND AVE. MIAMI, FL 33143 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #