2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 22, 2007 8:00 am Secretary of State

DOCUMENT # P0600000931 1. Entity Name GIVIK SALES, INC.					03-22-2007 90007 037 ***150.00					
Principal Place of Business Mailing Address										
705 MAINSAIL CIRCLE JUPITER, FL 33477 JUPITER, FL 33477										
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2. Principal Place of Business · No P.O. Box # 3. Mailing Address										
12817 Suite, Apt.	2814 Wood H Suite, Apt. #, etc.	Hill DR								
					03202007	Chg-P	CR2E034	<u> </u>		
Palm L		City & State Ralm Beach Gar	dens Fo	4	4. FEI Numbe	919710		- 	Applicable	
334/B	Country		untry			of Status Desired		.75 Addit	tional	
32418	6. Name and Address of Current Reg		45	!	7. Name and	Address of New Re	Fee	e Required		
Name Gigal S. FREDV										
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST.				Street Address (P.O. Box Number is Not Acceptable)						
4TH FLOOR MIAMI, FL 33145					WOODL	11LL DR				
MIANII, FL	33145		City O					Zio Codo		
Talm Deach Sardens FL 334/A										
8. The above named entity submits this patient of 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 Prosident 3/20/07										
Signature, type; of project name of registered agent and title if applicable (NOTE Registered Agent signature required when renstating) DATE										
FILE NOWILL FEE IS \$150.00 After May 1, 2007, Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
10.	· OFFICERS AND DIR		1		ADDITIONS/	CHANGES TO OFFIC				
TITLE NAME **	PTD GIRALDO, FREDY A		TLE Ame i	12Q	ימלער לו	HHIll De	Ų.	d Change	☐ Addition	
STREET ADDRESS	705 MAINSAIL CIRCLE	T C	PECT ADDDCCG	Palu		ch Gardens		224	10	
City-St-Zip	JUPITER, FL 33477 VSD			rain	N Dead	en Garaens				
TITLE NAME	GIRALDO, MARIA V		TLE AME	126	217 1.)	addill I		Change	Addition	
STREET ADDRESS	705 MAINSAIL CIRCLE	K -	incei Auuneap j	Palv	11 Wa	ach Gard		¹ / 25	zuia	
CITY-ST-ZIP TITLE	JUPITER, FL 33477		TLE	rain	M Dec	aci Gara		Change	Addition	
NAME			AME				_) Change	Addition	
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TITLE		☐ Delete TI	TLE] Change	Addition	
NAME STREET ADDRESS			AME FREET ADDRESS							
CITY-ST-ZIP			TY-ST-ZIP							
TITLE			TLE] Change	Addition	
NAME STREET ADDRESS			AME IREET ADDRESS							
CITY-ST-ZIP			TY-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 empeyored 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.										