## **2008 FOR PROFIT CORPORATION** ANNUAL REPORT

## Feb 18, 2008 08:00 AM Secretary of State DOCUMENT # P06000022938 1. Entity Name G & G EMBEDS, INC... Principal Place of Business Mailing Address 1490 PELL RD 1490 PELL RD OSTEEN, FL 32764 OSTEEN, FL 32764 No Chg-P CR2E034 (11/05) 01292008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-4321380 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent GILLIS, DAWN DO NOT WRITE 1490 PELL RD OSTEEN, FL 32764 IN THIS SPACE 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 tale if applicable (NOTE: Registered Agent signature required when reinstating) DATE H00000830013 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be na/26/08-80066-011 150.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE NAME GILLIS, DAWN STREET ADDRESS 1490 PELL RD CITY-ST-ZIP OSTEEN, FL 32764 TITLE NAME GILLIS, CHRIS STREET ADDRESS 1490 PELL RD OSTEEN, FL 32764 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 attactment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS CITY-ST-7IP

**FILED**