

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000030120

Entity Name: G.C. CUSTOM BUILDERS, INC.

FILED
Jan 23, 2008
Secretary of State

Current Principal Place of Business:

28380 OLD 41 ROAD UNIT #7
BONITA SPRINGS, FL 34135

New Principal Place of Business:

171 29 ST NW
NAPLES, FL 34117

Current Mailing Address:

28380 OLD 41 ROAD UNIT #7
BONITA SPRINGS, FL 34135

New Mailing Address:

171 29 STREET SW
NAPLES, FL 34117

FEI Number: 20-4455008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDERS, BERTA M
9550 NW 77TH AVENUE
HIALEAH GARDENS, FL 33016 US

Name and Address of New Registered Agent:

SANDERS, BERTA M
5781B NW 151 STREET
MIAMI LAKES, FL 33014 US

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.

SIGNATURE: BERTA M SANDERS CPA

01/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ALBORNOZ, GABRIEL
Address: 28380 OLD 41 ROAD UNIT #7
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DS () Delete
Name: SORIANO, LOURDES
Address: 3837 SW 8 STREET
City-St-Zip: MIAMI, FL 33134

Title: DT () Delete
Name: ALBORNOZ, LISSETTE
Address: 28380 OLD 41 ROAD UNIT #7
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ALBORNOZ, GABRIEL
Address: 171 29 STREET SW
City-St-Zip: MIAMI LAKES, FL 34117

Title: DS (X) Change () Addition
Name: SORIANO, LOURDES
Address: 171 29 STREET SW
City-St-Zip: MIAMI LAKES, FL 34117

Title: DT (X) Change () Addition
Name: ALBORNOZ, LISSETTE
Address: 171 29 STREET SW
City-St-Zip: MIAMI LAKES, FL 34117

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: LOURDES SORIANO

DS

01/23/2008

Electronic Signature of Signing Officer or Director

Date