2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 30, 2007 8:00 am Secretary of State DOCUMENT # P06000130163 04-30-2007 90394 003 ***158.75 1. Entity Name FATHER AND SON GIFTS INC. Principal Place of Business Mailing Address 40083113 4311 N.ORLANDO DR. 495 GRANITE CIRCLE 301 CHULUOTA, FL 32766 US SANFORD, FL 32773 Place of Business No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. 04172007 CR2E034 (12/06) City & State 4. FEI Number ✓ Applied For 205703108 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ESTREMERA, AMADO III **495 GRANITE CIRCLE** Street Address (P.O. Box Number is Not Acceptable) CHULUOTA, FL 32766 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition OROZCO, JOSEFINA NAME NAME STREET ADDRESS **495 GRANITE CIRCLE** STREET ADDRESS CHULUTOA, FL 32766 CITY-ST-ZIP CITY-ST-ZIP THIE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TITLE TITLE ☐ Channe NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

FILED

ATTACHMENT 40087774

Florida Department of State, Division of Corporations

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Public Inquiry

Florida Profit

FATHER AND SON GIFTS INC.

PRINCIPAL ADDRESS 4311 N.ORLANDO DR. 301 SANFORD FL 32773 US

MAILING ADDRESS 495 GRANITE CIRCLE CHULUOTA FL 32766 US

Document NumberP06000130163

State

Last Event ARTICLES OF CORRECTION **FEI Number**NONE

Status ACTIVE

Event Date Filed 04/05/2007

Date Filed

10/12/2006

Effective Date NONE

Event Effective
Date
NONE

Registered Agent

Name & Address

ESTREMERA, AMADO III

Officer/Director Detail

CHULUOTA FL 32766

Name & Address	Title
OROZCO, JOSEFINA 495 GRANITE CIRCLE	Р
CHULUTOA FL 32766	

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04/05/2007 -- Articles of Correction

03/07/2007 -- Amendment

10/12/2006 -- Domestic Profit

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