

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000134674

Entity Name: G 4 ENTERPRISE INC.

FILED
May 13, 2009
Secretary of State

Current Principal Place of Business:

214 1ST STREET
HAVANA, FL 32333

New Principal Place of Business:

Current Mailing Address:

214 1ST STREET
HAVANA, FL 32333

New Mailing Address:

PO BOX 624
HAVANA, FL 32333

FEI Number: 75-3161911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBSON, LANORRIS
447 MCGRUFF LANE
HAVANA, FL 32333 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: GIBSON, LANORRIS
Address: 447 MCGRUFF LANE
City-St-Zip: HAVANA, FL 32333

Title: V () Delete
Name: GIBSON, MATHELLA
Address: 447 MCGRUFF LANE
City-St-Zip: HAVANA, FL 32333

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LANORRIS GIBSON

PRES

05/13/2009

Electronic Signature of Signing Officer or Director

Date