

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000086057

Entity Name: GILICOR INC.

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

12995 S.W. 188 STREET  
MIAMI, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

12995 S.W. 188 STREET  
MIAMI, FL 33177

**New Mailing Address:**

FEI Number: 27-1135702

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GILIBERTI, ANTHONY R  
12995 S.W. 188 STREET  
MIAMI, FL 33177 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GILIBERTI, ANTHONY R  
Address: 12995 S.W 188 STREET  
City-St-Zip: MIAMI, FL 33177

Title: VP  
Name: GILIBERTI, NOREEN C  
Address: 12995 S.W 188 STREET  
City-St-Zip: MIAMI, FL 33177

Title: S  
Name: FORTE, NENA  
Address: 12995 S.W. 188 STREET  
City-St-Zip: MIAMI, FL 33177

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY R GILIBERTI

P

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date