

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000013587

Entity Name: GILL INDUSTRIES, INC.

FILED  
Apr 02, 2004  
Secretary of State

**Current Principal Place of Business:**

445 S VOLUSIA AVE  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

**Current Mailing Address:**

445 S VOLUSIA AVE  
ORANGE CITY, FL 32763

**New Mailing Address:**

FEI Number: 59-3229606

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GILL, DARSHAN  
445 S VOLUSIA AVE  
ORANGE CITY, FL 32763

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GILL, GURMIT  
Address: 445 S VOLUSIA AVE  
City-St-Zip: ORANGE CITY, FL

Title: VP ( ) Delete  
Name: GILL, DARSHAN  
Address: 445 VOLUSIA AVE.  
City-St-Zip: ORANGE CITY, FL

**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 for the exemption stated in Section 119.07(3)(i), 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: DARSHAN GILL

VP

04/02/2004

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

\_\_\_\_\_  
Date