

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000037063	
1. Entity Name G.I. AFFILIATES, INC.	

Principal Place of Business

**2140 W. 68 STREET
SUITE 305
HIALEAH, FL 33016**

Mailing Address

**P.O. BOX 56-0624
MIAMI, FL 33256**

DO NOT WRITE IN THIS SPACE



03232006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0684876	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fees Required
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6. Name and Address of Current Registered Agent

**PADILLA, VICTOR JR.
2140 W. 68 STREET
SUITE 305
HIALEAH, FL 33016**

**DO NOT WRITE
IN THIS SPACE**

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) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

**1000000507546
04/27/06-80068-006 150.00**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MADERAL, RAO
STREET ADDRESS	2140 W 68TH STREET #305
CITY-ST-ZIP	HIALEAH, FL 33016

TITLE	D
NAME	PINA, GEMA
STREET ADDRESS	2140 W 68TH STREET #305
CITY-ST-ZIP	HIALEAH, FL 33016

TITLE	P
NAME	PADILLA JR, VICTOR
STREET ADDRESS	2140 W 68TH STREET #305
CITY-ST-ZIP	HIALEAH, FL 33016

TITLE	D
NAME	CASTANEDA, JORGE X
STREET ADDRESS	2140 W 68TH STREET #305
CITY-ST-ZIP	HIALEAH, FL 33016

TITLE	D
NAME	AVILA, ALICIA
STREET ADDRESS	2140 W 68TH ST #305
CITY-ST-ZIP	HIALEAH, FL 33016

TITLE	D
NAME	MARTINEZ, JOSE J
STREET ADDRESS	2140 W 68TH ST #305
CITY-ST-ZIP	HIALEAH, FL 33016

**DO NOT WRITE
IN THIS SPACE**

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jose J Martinez Director

4/3/06

Date

305-342-6100

Daytime Phone #

JOSE J. MARTINEZ