

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000042041

Entity Name: G AND S CORPORATION OF HIALEAH

FILED
Jan 23, 2006
Secretary of State

Current Principal Place of Business:

1961 RIVER ROAD
JACKSONVILLE, FL 32207

New Principal Place of Business:

546 NE 6 AVENUE
GAINESVILLE, FL 32601

Current Mailing Address:**New Mailing Address:**

FEI Number: 59-3379383 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE
SUITE 3000
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: HADDAD, SOPHIA D
Address: 5405 W. 18TH AVE.
City-St-Zip: HIALEAH, FL 33012

Title: P () Delete
Name: HADDAD, CHARLES J
Address: 1961 RIVER ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP () Delete
Name: HADDAD, GEORGE M JR.
Address: 959 N.E. JUNIPER PL
City-St-Zip: JENSEN BEACH, FL 34954

Title: T () Delete
Name: DRAUD, MARY H
Address: 546 N.E. 6TH AVE
City-St-Zip: GAINESVILLE, FL 32601

Title: S () Delete
Name: VELEZ, MARGARET A
Address: 12655 S.W. 7TH PL
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: HADDAD, SOPHIA D
Address: 3744 SW QUAIL MEADOW TRAIL
City-St-Zip: PALM CITY, FL 34990

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

Title: VP (X) Change () Addition
Name: HADDAD, GEORGE M JR.
Address: 1429 SW PINE TREE LANE
City-St-Zip: PALM CITY, FL 34990

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: MARY DRAUD

TRES

01/23/2006

Electronic Signature of Signing Officer or Director

Date