

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000052280

Entity Name: GABY DESIGNS, INC.

FILED  
Jan 19, 2006  
Secretary of State

**Current Principal Place of Business:**

4722 NE 17TH AVE  
FORT LAUDERDALE, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

4722 NE 17TH AVE  
FORT LAUDERDALE, FL 33334

**New Mailing Address:**

FEI Number: 65-0994804      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CALIXTO, ANDRE  
4722 NE 17TH AVENUE  
FORT LAUDERDALE, FL 33334      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: DP      ( ) Delete  
Name: CALIXTO, ANDRE  
Address: 4722 NE 17TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33334

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD      ( ) Change (X) Addition  
Name: CALIXTO, CRISTIANE V  
Address: 4722 NE 17TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33334

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDRE CALIXTO

PD

01/19/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date