

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000026749

**Entity Name:** GABLES INVESTIGATIVE GROUP INC.

**FILED**  
**Feb 03, 2016**  
**Secretary of State**  
**CC1875177365**

**Current Principal Place of Business:**

14100 PALMETTO FRONTAGE ROAD  
109  
MIAMI LAKES, FL 33016

**Current Mailing Address:**

BOX 140605  
CORAL GABLES, FL 33114 US

**FEI Number: 46-2416671**

**Certificate of Status Desired: No**

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

GARCIA, PABLO  
14100 PALMETTO FRONTAGE ROAD  
109  
MIAMI LAKES, FL 33016 US

*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

**Officer/Director Detail :**

Title P  
Name GARCIA, PABLO  
Address 14100 PALMETTO FRONTAGE ROAD  
City-State-Zip: MIAMI LAKES FL 33016

Title S  
Name GARCIA, PABLO  
Address 14100 PALMETTO FRONTAGE ROAD  
City-State-Zip: MIAMI LAKES FL 33016

Title T  
Name GARCIA, PABLO  
Address 14100 PALMETTO FRONTAGE ROAD  
City-State-Zip: MIAMI LAKES FL 33016

*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: PABLO GARCIA**

**PRESIDENT**

**02/03/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date