

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013479

Entity Name: GBS STRATEGIES, INC.

FILED  
Mar 25, 2010  
Secretary of State

**Current Principal Place of Business:**

18501 PINES BLVD.  
#201 S.  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

18501 PINES BLVD.  
#201 S.  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

FEI Number: 20-0634306      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GBS CONSULTANTS  
18501 PINES BLVD.  
STE 201 S  
PEMBROKE PINES, FL 33026 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: TD  
Name: DIAZ, MARIA A  
Address: 18501 PINES BLVD. STE 201 S  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: PD  
Name: FERNANDEZ, JORGE E  
Address: 18501 PINES BLVD. STE 201 S  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VPD  
Name: RAMIREZ, LUIS D  
Address: 18501 PINES BLVD. STE 201 S  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: SD  
Name: HERRERA, RITA  
Address: 18501 PINES BLVD. STE 201 S  
City-St-Zip: PEMBROKE PINES, FL 33029

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: MARIA A DIAZ

D

03/25/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date