**FILED** 

| ANNUAL REPORT                                    |  |   |  |  |   | Feb 14, 2006 08:00 AM                                    |   |  |  |
|--|--|---|--|--|---|--|---|--|--|
| DOCU<br>1. Entity Nam<br>GSE ROT                 | ne   | # P0400014  | 40527  | <b>V</b>   |   |  | Secre   | tary of  | State  |
| Principal Plac<br>3564 SW 14<br>MIAMI, FL 3      | 3RD CT.  | ss  | 3564   | Address<br>SW 143RD CT.<br>, FL 33175  |   |  |   | 18 88 8 <b>18 8 18 8 1</b> 8 8 18 8 18 8 18                      |  |
| DO NOT WRITE IN THIS SPACE                       |  |   |  |  |   | 02022006   | Na Chg-P  | CR2E034 (11  |  |
|  |  |   |  |  |   | 4. FEI Numbe<br>86-111                                   |   | }  | Applied For<br>Not Applicable                                  |
|  | ar pass  |   |  |  |   | 5. Certificate   | of Status Desired   |  | 5 Additional<br>equired  |
| NUNEZ, F<br>3564 SW 1<br>MIAMI, FL               | RANCIS   |   | ent Registered   | Agent  |   |  | NOT W   |  |  |
| 8. The above                                     | named ent  | ity submits this statemen   | nt for the purpos  | se of changing its regist  | ered attice or register   | red agent, or bo   | th, in the State of Fic   | rîda. I am familiar  | with, and accept   |
| the obligations of registered agent.  SiGNATURE  |  |   |  |  |   |  |   |  |  |
| Fil.<br>After Ma                                 | E NOW!!<br>ay 1, 200   | FEE IS \$150.00<br>  Fee will be \$55   | ι .  | Election Campaign Fir<br>Trust Fund Contributio  | pancing \$5   | .00 May Be<br>led to Fees                                |   |  |  |
| 10.  | , _  | OFFICERS A  | NO DIRECTOR  | S  |   |  |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY: ST-ZIP  | 3564 SV  | FRANCISCO<br>V 143RD CT.<br>FL 33175  |  |  |   |  |   |  | į  |
| TUTLE<br>NAME<br>STREET ADDRESS<br>CUTY-ST-ZIP   |  |   |  |  |   |  | U0000<br>02/24/06   | 0433722<br>-80028-024  | 4 150.00   |
| TITLE NAME STREET AUDRESS CITY-ST-ZIP            |  | _   |  |  |   | DO   | NOT W   | RITE   |  |
| title '<br>Name<br>Street adoress<br>City-St-Zip |  |   |  | ·  |   | IN T   | THIS SF   | PACE   |  |
| TITLE<br>NAME<br>SIREET ADDRESS<br>CITY-ST-ZIP   |  |   |  |  |   |  |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  |   |  |  |   |  |   |  |  |
| 12. I hereby of indicated of the cor changed,    | certify that to<br>on this reb<br>peration of<br>, or on an at | he information supplied to<br>ord or supplemental repo<br>the receiver outrustee en<br>techment with an address | with this filing of<br>rt is true and ac<br>mpowered to ea<br>ss. with all other | loes not qualify for the cocurate and that my sign<br>xecute this report as record this report as record this report as record this report as record the sempowered. | exemptions contained<br>nature shall have the<br>juired by Chapter 60 | in Chapter 119<br>same legal effec<br>7, Florida Statute | t, Florida Statutes. It<br>it as if made under o<br>s; and that my name | further certify that<br>eith; that I am an o<br>appears in Block | the information<br>officer or director<br>to 10 or Block 11 if |

SIGNATURE AND THE GOVERNME OF SIGNING OFFICER OR GIRECTOR