

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159078

Entity Name: GSQ INVESTMENTS, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

1717 ARABIAN LANE
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

1717 ARABIAN LANE
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 20-1985071 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGAL ZOOM NEVADA, INC.
44 W. FLAGLER ST.
SUITE 675
MIAMI, FL 33130 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: DIR () Delete
Name: SILBERT, ROBERT
Address: 1717 ARABIAN LANE
City-St-Zip: PALM HARBOR, FL 34685 US

Title: DIR () Delete
Name: GILES, NICHOLAS
Address: 1717 ARABIAN LANE
City-St-Zip: PALM HARBOR, FL 34685 US

Title: DIR () Delete
Name: GILES, LEIGH
Address: 1717 ARABIAN LANE
City-St-Zip: PALM HARBOR, FL 34685 US

Title: DIR () Delete
Name: SILBERT, CONNIE L
Address: 1717 ARABIAN LANE
City-St-Zip: PALM HARBOR, FL 34685 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: ROBERT SILBERT

PRES

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date