2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000095949

Entity Name: GAMBY, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
--	----------------------------

934 N UNIVERSITY DR 1100 S STATE RD 7

#431 102

CORAL SPRINGS, FL 33071 MARGATE, FL 33068 US

Current Mailing Address: New Mailing Address:

934 N UNIVERSITY DR 934 N UNIVERSITY DR

#431 431

CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33071 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

TAX DEFENSE CENTER, INC.
2350 W 84TH STREET
GAMBOA, DANIEL
934 N UNIVERSITY DR

#18 #3016 US #34 N ONIVERSITY DR

#34 N ONIVERSITY DR

#34 N ONIVERSITY DR

#35 CORAL SPRINGS, FL 33071 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: DANIEL GAMBOA 04/28/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 GAMBOA, TATIANA
 Name:
 GAMBOA, DANIEL

 Address:
 934 N UNIVERSITY DR #431
 Address:
 934 N UNIVERSITY DR #431

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:
 CORAL SPRINGS, FL 33071 US

Title: P (X) Delete Title: () Change () Addition

 Name:
 GAMBOA, DANIEL
 Name:

 Address:
 934 N UNIVERSITY DR #431
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL GAMBOA P 04/28/2008