


**FILED**  
**Feb 26, 2008 08:00 AM**  
**Secretary of State**

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT # P06000137393**

1. Entity Name  
**GESFOR USA, INC.**



Principal Place of Business <b>1221 BRICKELL AVE          9TH FLOOR          MIAMI, FL 33131</b>	Mailing Address <b>1221 BRICKELL AVE          9TH FLOOR          MIAMI, FL 33131</b>
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02222008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-5808673</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**TORRENTS, JORDI R MR  
 2655 LE JEUNE RD  
 SUITE 804  
 CORAL GABLES, FL 33134**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST HURTADO, JORGE MR AVDA MANOTERAS 32 MADRID SPAIN, SP 28050
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 03/06/08-80029-020 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **JORGE HURTADO** 02/22/08 305 804 025 4

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #