

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000100351

FILED  
May 02, 2009  
Secretary of State

Entity Name: GAMMA CLINICAL CONSULTING, INC.

**Current Principal Place of Business:**

15731 SW 137TH AVENUE  
SUITE 101  
MIAMI, FL 33177 US

**New Principal Place of Business:**

**Current Mailing Address:**

15731 SW 137TH AVENUE  
SUITE 101  
MIAMI, FL 33177 US

**New Mailing Address:**

FEI Number: 26-3692476      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

THE LAW OFFICES OF NICK SPRADLIN, PLLC  
12000 NORTH DALE MABRY HWY  
SUITE 110  
TAMPA, FL 33618 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: ARGUEDAS, SERGIO  
Address: 15731 SW 137TH AVENUE SUITE 101  
City-St-Zip: MIAMI, FL 33177 US

Title: D ( ) Delete  
Name: ARGUEDAS, NATALI  
Address: 15731 SW 137TH AVENUE SUITE 101  
City-St-Zip: MIAMI, FL 33177 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: SERGIO ARGUEDAS

DPST

05/02/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date