2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary of State **DOCUMENT #468479** 01-14-2008 90090 005 ***150.00 1. Entity Name GAMMA CONSTRUCTION, INC. Principal Place of Business Mailing Address 4000×11~ 4850 S.W. 72ND AVENUE 4850 S.W. 72ND AVENUE MIAMI, FL 33155 MIAMI, FL 33155 Principal Place of Business - No P.O. Box # 3. Mailing Address 9840 SW 77th Ave 9840 SW 77th Ave Suite, Apt. #, etc. Suite, Apt. #, etc. 01082008 CR2E034 (12/06) 301 30 City & State City & State 4. FEI Number Applied For MiamiFL MIIami, FL 59-1588748 Not Applicable Country Country USA \$8.75 Additional 5. Certificate of Status Desired 3315U 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ervantos, Patricio CERVANTES, PATRICIO Street Address (P.O. Box Number is Not Acceptable 4850 SW 72 AVE MIAMI, FL 33155 Miami 8. The above named entity submits this statement for the perpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of register age SIGNATURE Signature, typed or printed name of registered agent and (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 \Box Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE ☐ Change ■ Addition cervantes, Petricio CERVANTES, PATRICIO NAME NAME 9840 SW 77+n Avenue, 301 STREET ADDRESS 4850 SW 72 AVENUE STREET ADDRESS MIAMI, FL 33155 CITY-ST-ZIP CITY-ST-ZIP MII ami FL 33154 Delete Change TITLE TITLE ■ Addition cervantas, Maria E. CERVANTES, MARIA E NAME NAME 9840 SW 77th Avenue, 301 STREET ADDRESS 4850 SW 72 AVENUE STREET ADDRESS MIAMI, FL 33155 CITY-ST-7IP MII ami, FL 3315LD CITY - ST - ZIP Delete Change Addition DILE THE Jhones, Jorge 9840 SW 77th Avenue, 301 JHONES, JORGE NAME NAME STREET ADDRESS 4850 S.W. 72ND AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33155 CITY-ST-7IP MIIOMI, FL 33150 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 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.

FILED Jan 14, 2008 8:00 am

Daytime Phone #