2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 546194

Title:

Name:

Address:

Entity Name: GAM ROBERT CERAMIC TILES INC.

(X) Delete

GUERRA-BURGALASSI, ROBERTO

13801 N.W 22 PL.

City-St-Zip: SUNRISE, FL 33323

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
950 MOCKINGBIRD LANE				950 MOCKINGBIRD LANE				
#615 PLANTATION, FL 33324				#615 PLANTATION, FL 33324				
Current Mailing Address:				New Mailing Address:				
8550 W FLAGLER ST #111 % BART C VIDAL MIAMI, FL 33144				8550 W FLAGLER ST #111 BART C VIDAL MIAMI, FL 33144				
FEI Number: 59-1782019 FEI Number Applied For () FEI Number			FEI Numb	ber Not Applicable () Certificate of Status Desired ())	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
8550 W FL	GUIDO GUERF AGLER ST #11 33144 US							
The above in the State		bmits this statement for the p	ourpose of o	changing it	s registered	d office or	registered agent, or	both,
SIGNATUR	RE:							
Electronic Signature of Registered Agent				Date				
Election Can	npaign Financing 1	Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PD () C GUERRA-MENES 950 MOCKINGBII PLANTATION, FL	*	Δ	Title: Name: Address: Dity-St-Zip:		() Change	() Addition	
Title: Name: Address: City-St-Zin:	SD () D BURGALASSI GU 950 MOCKINGBIR PLANTATION FI	· · · · · · · · · · · · · · · · · · ·	۱ م	Title: Name: Nddress: Dity-St-Zin:	VP GUERRA BU 13801 NW 2 SUNRISE E	JRGALASSI, 22 PL	() Addition ROBERTO	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: GUIDO GUERRA MENESINI PSD 02/04/2009

() Change () Addition