2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# 557491

Entity Name: GYRO-GALE CORP.

Current Principal Place of Business:

2981 SE DOMINICA TERR
2981 SE DOMINICA TERRACE
STUART, FL 34997

New Principal Place of Business:

2981 SE DOMINICA TERR
2981 SE DOMINICA TERR
STUART, FL 34997

Current Mailing Address:

PO BOX 2650
STUART, FL 34995

New Mailing Address:

FEI Number: 59-1836223 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

METWALLY, MAGED
2981 SE DOMINICA TERRACE
STUART, FL 34997 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: METWALLY, MAGED,
Address: PO BOX 5650
City-St-Zip: STUART, FL 34995

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: METWALLY, MAGED,
Address: PO BOX 2650
City-St-Zip: STUART, FL 34995

Title: V.P. ( ) Change (X) Addition
Name: ZEYAD METWALLY,
Address: P.O.BOX 2650
City-St-Zip: STUART, FL 34995

Title: SEC ( ) Change (X) Addition
Name: ASMAA METWALLY,
Address: P.O.BOX 2650
City-St-Zip: STUART, FL 34995

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: MAGED METWALLY P 03/19/2009

Electronic Signature of Signing Officer or Director — Date