2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# F00000004646

Entity Name: GBNET CORPORATION

Current Principal Place of Business:

848 BRICKELL AVE
SUITE 1205
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

2285 COLUMBIA
WESTON, FL 33326

New Mailing Address:

FEI Number: 87-0645084 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEON, LYNETTE
2285 COLUMBIA
WESTON, FL 33326 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: S ( ) Delete
Name: MEDINA, LUIS A
Address: 848 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131

Title: T ( ) Delete
Name: GERRARD, IAN B
Address: 848 BRICKELL AVE, STE 1205
City-St-Zip: MIAMI, FL 33131

Title: COB ( ) Delete
Name: KAPAZZ, GEORGE M
Address: 848 BRICKELL AVE, STE 1205
City-St-Zip: MIAMI, FL 33131

Title: PCEO ( ) Delete
Name: MARCHENA, JORGE
Address: 848 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SECR (X) Change ( ) Addition
Name: MEDINA, LUIS A
Address: 848 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131

Title: PRES (X) Change ( ) Addition
Name: KRIZNIC, IVANA
Address: 2222 JOURNET DR.
City-St-Zip: DUNN LORING, VA 22027

Title: VP (X) Change ( ) Addition
Name: BROOKS, BRIAN
Address: 1600 TYSONS BLVD
City-St-Zip: MCLEAN, VA 22102

Title: CEO (X) Change ( ) Addition
Name: MORZORATI, LYNN
Address: 4814 THOMAS AVE. SO
City-St-Zip: MINNEAPOLIS, MN 55410

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: LYNETTE LEON AGEN 05/01/2008

Electronic Signature of Signing Officer or Director Date