

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G76746

FILED
Apr 01, 2008
Secretary of State

Entity Name: GDM CORPORATION

Current Principal Place of Business:

DBA BEAUTY CENTER
1388 SE 17TH STREET
FT. LAUDERDALE, FL 33316 US

New Principal Place of Business:

DBA BEAUTY CENTER
1683 MARKET STREET
WESTON, FL 33324 US

Current Mailing Address:

DBA BEAUTY CENTER
1683 MARKET STREET
WESTON, FL 33332 US

New Mailing Address:

FEI Number: 59-2396685 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GADH, GURPARTAP SINGH
3855 WINDMILL LAKE ROAD
FT. LAUDERDALE, FL 33332 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: DP () Delete
Name: GADH, GURPARTAP,
Address: 3855 WINDMILL LAKES ROAD
City-St-Zip: WESTON, FL 33332 US

Title: DP () Delete
Name: GADH, MANSTINDER K,
Address: 3855 WINDHILL LAKE ROAD
City-St-Zip: WESTON, FL 33332 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: GURPARTAP GADH

DP

04/01/2008

Electronic Signature of Signing Officer or Director

_____ Date