

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062538

Entity Name: GOSPA INVEST, LLC

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

5930 NW 102 AVENUE #8
DORAL, FL 33178

New Principal Place of Business:

5949 NW 102 AVENUE
DORAL, FL 33178

Current Mailing Address:

5930 NW 102 AVENUE #8
DORAL, FL 33178

New Mailing Address:

5949 NW 102 AVENUE
DORAL, FL 33178

FEI Number: 20-3397791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALANI, MARILYN
5930 NW 102 AVENUE #8
DORAL, FL 33178 US

Name and Address of New Registered Agent:

SALANI, MARILYN
5949 NW 102 AVENUE
DORAL, FL 33178 US

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: MARILYN SALANI

04/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SALANI, ANDREA
Address: 5930 NW 102 AVENUE #8
City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete
Name: SALANI, MARILYN
Address: 5930 NW 102 AVENUE #8
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SALANI, ANDREA
Address: 5949 NW 102 AVENUE
City-St-Zip: DORAL, FL 33178

Title: MGRM (X) Change () Addition
Name: SALANI, MARILYN
Address: 5949 NW 102 AVENUE
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARILYN SALANI

MGRM

04/28/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date