2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L19540

City-St-Zip:

MIAMI, FL 33166

Entity Name: GAMA PRODUCTS, INC.

FILED Jan 18, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
C/O MARTA DE VARONA 8025 N.W. 60TH STREET MIAMI, FL 33166	C/O MARTA DE VARONA 11725 N.W. 100TH ROAD SUITE 3 MIAMI, FL 33178 10
Current Mailing Address:	New Mailing Address:
C/O MARTA DE VARONA 8025 N.W. 60TH STREET MIAMI, FL 33166	C/O MARTA DE VARONA 8001 N.W. 60TH STREET MIAMI, FL 33166
FEI Number: 65-0152888 FEI Number Applied For () FEI Number	nber Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
DE VARONA, MARTA T 8029 N.W. 60TH STREET MIAMI, FL 33166 US	DE VARONA, MARTA T 8001 N.W. 60TH STREET MIAMI, FL 33166 US
The above named entity submits this statement for the purpose of in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: MARTA DE VARONA	01/18/2007
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: D () Delete	Title: () Change () Addition

() Change () Addition ABRANTE, ALBERTO R., Name: Name: 8001 NW 60TH ST Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: () Delete Title: () Change () Addition ABRANTE, JOSE MANUEL, Name: Name: Address: 11725 N.W. 100 RD. SUITE #3 Address: City-St-Zip: MEDLEY, FL City-St-Zip: () Delete Title: Title: () Change () Addition Name: DE VARONA, MARTA, Name: Address: 8001 N.W. 60TH STREET Address:

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 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.

City-St-Zip:

SIGNATURE: MARTA DE VARONA T 01/18/2007