2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004370

Entity Name: GAME, SET, CURE, INC.

Current Principal Place of Business:

FILED May 05, 2008 Secretary of State

| COCONUT GROVE, FL 33133 | COCONUT GROVE, FL 33133 US |
|---|---|
| Current Mailing Address: | New Mailing Address: |
| 2961 DAY AVENUE COCONUT GROVE, FL 33133 | 2961 DAY AVENUE SUITE A COCONUT GROVE, FL 33133 US |
| FEI Number: 33-1165908 FEI Number Applied For () FEI Null In accordance with s. 607.193(2)(b), F.S., the corporation did not receive Name and Address of Current Registered Agent: | umber Not Applicable () Certificate of Status Desired () the prior notice. Name and Address of New Registered Agent: |
| MARTINS, MONIKA 8365 SW 84TH TERRACE MIAMI, FL 33143 US | BROWARNIK, DIANE L DIANE B 2961 A DAY AVENUE SUITE A MIAMI, FL 33133 US |
| The above named entity submits this statement for the purpose in the State of Florida. | of changing its registered office or registered agent, or both |
| SIGNATURE: DIANE BROWARNIK | 05/05/2008 |
| Electronic Signature of Registered Agent | Date |

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Business:

| Title: | P () Delete | Title: | ()Change ()Addition |
|--------------|-------------------------|--------------|---------------------------|
| Name: | BROWARNIK, DIANE | Name: | |
| Address: | 2961 DAY AVENUE | Address: | |
| City-St-Zip: | COCONUT GROVE, FL 33133 | City-St-Zip: | |
| Title: | D () Delete | Title: | D (X) Change () Addition |
| Name: | ROSENKRANZ, DEBBIE | Name: | SHATAS, ANNE |
| Address: | 5901 SW 97TH STREET | Address: | 3814 EL PRADO |
| City-St-Zip: | PINECREST, FL 33156 | City-St-Zip: | COCONUT GROVE,, FL 33133 |
| Title: | D () Delete | Title: | D (X) Change () Addition |
| Name: | BANKLAYDER, MARIA | Name: | MILLER, LYNDA A |
| Address: | 10420 SW 123RD STREET | Address: | 350 ISLA DORADA |
| City-St-Zip: | MIAMI, FL 33176 | City-St-Zip: | CORAL GABLES, FL 33133 |
| Title: | D () Delete | Title: | D (X) Change () Addition |
| Name: | LICHTNER, DEBRA | Name: | ALCAY, CATHY |
| Address: | 12820 SW 69TH AVENUE | Address: | 4371 CULTRY DRIVE |
| City-St-Zip: | PINECREST, FL 33156 | City-St-Zip: | COCONUT GROVE,, FL 33133 |
| Title: | D () Delete | Title: | D (X) Change () Addition |
| Name: | FIORENTINO, MELISSA | Name: | WADLEY, CATHERINE |
| Address: | 9802 SW 111TH TERRACE | Address: | 3675 BATTERSEA ROAD |
| City-St-Zip: | MIAMI, FL 33176 | City-St-Zip: | COCONUT GROVE,, FL 33133 |
| Title: | () Delete | Title: | D () Change (X) Addition |
| Name: | | Name: | LEE, LERA |
| Address: | | Address: | 100 EAST DILIDO |
| City-St-Zip: | | City-St-Zip: | MIAMI BEACH, FL 33139 |

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE BROWARNIK PRES 05/05/2008