2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000064243

Entity Name: GUSGAREZ, INC.

FILED Mar 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9639 LAKE JASMINE DR 21707 GARDEN WALK LOOP TAMPA, FL 33626 LAND O LAKES, FL 34637

Current Mailing Address: New Mailing Address:

9639 LAKE JASMINE DR 21707 GARDEN WALK LOOP TAMPA, FL 33626 LAND O LAKES, FL 34637

FEI Number: 59-3674515 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARCIA, GUSTAVO
9639 LAKE JASMINE DR
21707 GARDEN WALK LOOP
TAMPA, FL 33626 US
LAND O LAKES, FL 34637 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: GUSTAVO GARCIA 03/08/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GARCIA, GUSTAVO

Address: 9639 LAKE JASMINE DR City-St-Zip: TAMPA, FL 33626

 Title:
 P
 () Delete

 Name:
 ACOSTA-GARCIA, NHORA

 Address:
 9639 LAKE JASMINE DR

City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition

 Name:
 GARCIA, GUSTAVO

 Address:
 21707 GARDEN WALK LOOP

 City-St-Zip:
 LAND O LAKES, FL 34637

Title: P (X) Change () Addition

Name: ACOSTA-GARCIA, NHORA Address: 21707 GARDEN WALK LOOP City-St-Zip: LAND O LAKES, FL 34637

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.

SIGNATURE: NHORA ACOSTA GARCIA P 03/08/2007