

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000133139

**FILED**  
**Mar 07, 2006**  
**Secretary of State****Entity Name:** GULFSTREAM INTERNATIONAL REALTY CORPORATION**Current Principal Place of Business:**4264 DAVIE ROAD  
DAVIE, FL 33314**New Principal Place of Business:**6411 STIRLING RD  
DAVIE, FL 33314**Current Mailing Address:**4264 DAVIE ROAD  
DAVIE, FL 33314**New Mailing Address:**6411 STIRLING RD  
DAVIE, FL 33314**FEI Number:** 16-1644758**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CURRID, GINA L  
4264 DAVIE ROAD  
DAVIE, FL 33314 US**Name and Address of New Registered Agent:**CURRID, GINA L  
6411 STIRLING RD  
DAVIE, FL 33314 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:** GINA L CURRID

03/07/2006

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** P ( ) Delete  
**Name:** CURRID, GINA L  
**Address:** 4264 DAVIE ROAD  
**City-St-Zip:** DAVIE, FL 33314**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change ( ) Addition  
**Name:** CURRID, GINA L  
**Address:** 6411 STIRLING RD  
**City-St-Zip:** DAVIE, FL 33314

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:** GINA L CURRID

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03/07/2006

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Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date