


2006 FOR PROFIT CORPORATION REINSTATEMENT


DOCUMENT # P03000045749 1. Entity Name GAMM, INC.	
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FILED
06 FEB -3 PM 3:19

Principal Place of Business 3701 NORTH COUNTRY CLUB DRIVE #609 AVENTURA, FL 33180	Mailing Address P.O. BOX 800825 AVENTURA, FL 33280
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SECRETARY
TALLAHASSEE, FLORIDA

2. Principal Place of Business 9000 Sheridan Street Suite, Apt. #, etc. 158	3. Mailing Address 9000 Sheridan Street Suite, Apt. #, etc. 158
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REINSTATEMENT 05-06
 01272006 REINSTATE 002E098 (1/05)

City & State Pembroke Pines FL	City & State Pembroke Pines FL	4. FEI Number 41-2092301	Applied For <input type="checkbox"/> Not Applicable
Zip 33024	Country USA	Zip 33024	Country USA

6. Name and Address of Current Registered Agent DRESZER, DOLLY 3701 NORTH COUNTRY CLUB DRIVE #609 AVENTURA, FL 33180	7. Name and Address of New Registered Agent Name Deborah Pios Street Address (P.O. Box Number is Not Acceptable) 9000 Sheridan Street Suite 158 City Pembroke Pines FL Zip Code 33024
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Deborah Pios* DATE: 1/27/06

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE	P <input type="checkbox"/> Delete
NAME	ORDONEZ, DEYANIRA
STREET ADDRESS	3760 INVERRARY DRIVE, UNIT N2J
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	S <input checked="" type="checkbox"/> Delete
NAME	GODOY, TIRSO
STREET ADDRESS	3760 INVERRARY DRIVE, UNIT N2J
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	T <input type="checkbox"/> Delete
NAME	GODOY, MONICA
STREET ADDRESS	3760 INVERRARY DRIVE, UNIT N2J
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Godoy, Gustavo
STREET ADDRESS	3760 Inverrary Drive Unit N2J
CITY-ST-ZIP	Lauderhill, FL 33319
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	300067020559
STREET ADDRESS	03/03/06--01025--007 **300.00
CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gustavo Godoy* DATE: 1-27-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR