

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094441

Entity Name: GAMA2402 CORP.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

2246 WESTON RD.
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

2246 WESTON RD.
WESTON, FL 33326

New Mailing Address:

FEI Number: 76-0739814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE ZABARDI, PATRICIA L
3843 FALCON RIDGE CIRCLE
WESTON, FL 33331 US

Name and Address of New Registered Agent:

MAZZEI, MARIAGABRIELA
3820 TREE TOP DR
WESTON, FL 33332 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: MARIAGABRIELA MAZZEI

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MAZZEI, MARIAGABRIELA
Address: 3820 TREE TOP DRIVE
City-St-Zip: WESTON, FL 33332

Title: VPD () Delete
Name: DE ZABARDI, PATRICIA L
Address: 3843 FALCON RIDGE CIRCLE
City-St-Zip: WESTON, FL 33331

Title: VPD () Delete
Name: ZABARDI, ANDREA
Address: 3843 FALCON RIDGE CIRCLE
City-St-Zip: WESTON, FL 33331

Title: VPD () Delete
Name: SERRAO, JOSE
Address: 3820 TREE TOP DRIVE
City-St-Zip: WESTON, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIAGABRIELA MAZZEI

PSTD

04/21/2005

Electronic Signature of Signing Officer or Director

Date