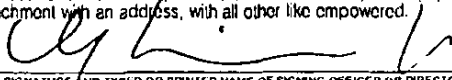


# 2007 FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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**FILED**  
**Jun 04, 2007 8:00 am**  
**Secretary of State**

03-21-2007 90041 032 \*\*\*\*\*8.75  
06-04-2007 90009 028 \*\*\*141.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     |                                                                                                                                                              |                                                                                                                     |                                                                                                                                                                                                                               |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # P03000110540</b><br>1. Entity Name<br><b>G. LOMBARDI INVESTMENTS CORPORATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                     |                                                                                                                                                              |                                                                                                                     |                                                                                                                                              |  |
| Principal Place of Business<br><b>150 BRADLEY PLACE<br/>#903<br/>PALM BEACH FL 33480<br/>US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     |                                                                                                                                                              | Mailing Address<br><b>150 BRADLEY PLACE<br/>#903<br/>PALM BEACH FL 33480<br/>US</b>                                 |                                                                                                                                                                                                                               |  |
| 2. Principal Place of Business - No P.O. Box #<br><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                     |                                                                                                                                                              | 3. Mailing Address<br><br>                                                                                          |                                                                                                                                                                                                                               |  |
| Suite, Apt. #, etc.<br><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                     |                                                                                                                                                              | Suite, Apt. #, etc.<br><br>                                                                                         |                                                                                                                                                                                                                               |  |
| City & State<br><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                     |                                                                                                                                                              | City & State<br><br>                                                                                                |                                                                                                                                                                                                                               |  |
| Zip<br><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                     | Country<br><br>                                                                                                                                              |                                                                                                                     | Zip<br><br>                                                                                                                                                                                                                   |  |
| Country<br><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     | 4. FEI Number <b>11-3708586</b> <div style="float: right;"> <input type="checkbox"/> Applied For<br/> <input type="checkbox"/> Not Applicable         </div> |                                                                                                                     |                                                                                                                                                                                                                               |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     |                                                                                                                                                              |                                                                                                                     | 6. Name and Address of Current Registered Agent<br><br><b>KUHARCIK, JOSEPH ESQ.<br/>1211 THE PLAZA<br/>SINGER ISLAND FL 33404</b>                                                                                             |  |
| 7. Name and Address of New Registered Agent<br>Name<br><br>Street Address (P.O. Box Number is Not Acceptable)<br><br><br>City<br><div style="float: right;"> <b>FL</b> Zip Code         </div>                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                     |                                                                                                                                                              |                                                                                                                     | 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 _____ (NOTE: Registered Agent signature required when registering) DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                     |                                                                                                                                                              |                                                                                                                     |                                                                                                                                                                                                                               |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2007 Fee Will Be \$550.00</b><br><b>Make Check Payable to Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     |                                                                                                                                                              | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                                                                                                                                                                               |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                     |                                                                                                                                                              | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                        |                                                                                                                                                                                                                               |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | D LOMBARDI, GUIDO <input type="checkbox"/> Delete<br>150 BRADLEY PLACE, #903<br>PALM BEACH FL 33480 |                                                                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                             |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete                                                                     |                                                                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                             |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete                                                                     |                                                                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                             |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete                                                                     |                                                                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                             |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete                                                                     |                                                                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                             |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete                                                                     |                                                                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                             |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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. |                                                                                                     |                                                                                                                                                              |                                                                                                                     |                                                                                                                                                                                                                               |  |
| <b>SIGNATURE:</b>  <div style="float: right;">         Date _____       </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                     |                                                                                                                                                              |                                                                                                                     |                                                                                                                                                                                                                               |  |