2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028258

Entity Name: G.S.S. ANGELS ENTERPRISE, INC.

FILED Apr 10, 2006 Secretary of State

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

4042 N W 181 ST LN 19052 NW 54TH CT MIAMI GARDENS, FL 33055 MIAMI, FL 33055

Current Mailing Address: New Mailing Address:

4042 N W 181 ST LN 19052 NW 54TH CT MIAMI GARDENS, FL 33055 MIAMI, FL 33055

FEI Number: 90-0145637 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:

 WRIGHT, STEPHANIE E
 WRIGHT, STEPHANIE E

 4042 N W 181ST LN
 19052 NW 54TH CT

 MIAMI GARDENS, FL 33055
 US

 MIAMI, FL 33055
 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: 04/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete

 Name:
 WRIGHT, STEPHANIE E

 Address:
 4042 N W 181ST LN

 City-St-Zip:
 MIAMI GARDENS, FL 33055

 Title:
 V
 () Delete

 Name:
 MORRIS, WILLIE L JR

 Address:
 4042 N W 181ST LN

 City-St-Zip:
 MIAMI GARDENS, FL 33055

 Title:
 ST
 () Delete

 Name:
 MORRIS, TAMARA

 Address:
 4042 N W 181ST LN

 City-St-Zip:
 MIAMI GARDENS, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 (X) Change () Addition

 Name:
 WRIGHT, STEPHANIE E

 Address:
 19052 NW 54TH CT

 City-St-Zip:
 MIAMI, FL 33055

Title: V (X) Change () Addition

 Name:
 MORRIS, WILLIE L JR

 Address:
 19052 NW 54TH CT

 City-St-Zip:
 MIAMI, FL 33055

Title: ST (X) Change () Addition

 Name:
 MORRIS, TAMARA

 Address:
 19052 NW 54TH CT

 City-St-Zip:
 MIAMI GARDENS, FL 33055

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: STEPHANIE E. WRIGHT P 04/10/2006