

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90260 019 ***150.00

DOCUMENT # P05000060268

1. Entity Name

GAN INVESTMENTS, INC.



Principal Place of Business

2083 NORTH POINTE ALEXIS DRIVE
TARPON SPRINGS FL 34689

Mailing Address

2083 NORTH POINTE ALEXIS DRIVE
TARPON SPRINGS FL 34689



2. Principal Place of Business

407 Mars Ave 50

Suite, Apt. #, etc.

3. Mailing Address

2083 North Pointe Alexis Dr

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

Clearwater, FL

Zip 33755

Country USA

City & State

Tarpon Springs, FL

Zip 34689

Country USA

4. FEI Number

34 2045617

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GAN, JACQUELINE
2083 NORTH POINTE ALEXIS DRIVE
TARPON SPRINGS FL 34689

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME GAN, ROY
STREET ADDRESS 2083 NORTH POINTE ALEXIS DRIVE
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE ST ☐ Delete
NAME GAN, JACQUELINE
STREET ADDRESS 2083 NORTH POINTE ALEXIS DRIVE
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jacqueline GAN, Secretary & Treasurer

Date

Daytime Phone #

3/14/06 (727) 271-9944