

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000080332

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** GROUP INTERACTIVE SOLUTIONS, INC.

**Current Principal Place of Business:**

230 NW 2ND AVE.  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

230 NW 2ND AVE.  
GAINESVILLE, FL 32601

**New Mailing Address:**

**FEI Number:** 20-2937906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FIELDMAN, ETHAN  
230 NW 2ND AVE.  
GAINESVILLE, FL 32601 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FIELDMAN, ETHAN  
Address: 230 NW 2ND AVE.  
City-St-Zip: GAINESVILLE, FL 32601

Title: CEO  
Name: HINTZE, MATTHEW  
Address: 230 NW 2ND AVE.  
City-St-Zip: GAINESVILLE, FL 32601

I hereby 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 all other like empowered.

SIGNATURE: ETHAN FIELDMAN

P

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date