## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000146561

Entity Name: GAMBO INDUSTRIES INC

20225 NE 34 AVENUE APT 2517

AVENTURA, FL 33180

Address: City-St-Zip: FILED May 08, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 20225 NE 34 AVENUE **APT 2517** AVENTURA, FL 33180 **New Mailing Address: Current Mailing Address:** 5805 BLUE LAGOON DRIVE 5805 BLUE LAGOON DRIVE STE 200 STE 200 MIAMI, FL 333126 MIAMI, FL 33126 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AG CORPORATE SERVICES, LLC 5805 BLUE LAGOON DRIVE STE 200 MIAMI, FL 33126 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition GAMBORINO, ARMANDO Name: Name: 20225 NE 34 AVENUE APT 2517 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: ( ) Delete Title: VΡ Title: () Change () Addition Name: HUERTA, MARGARITA Name: 20225 NE 34 AVENUE APT 2517 Address: Address: AVENTURA, FL 33180 City-St-Zip: City-St-Zip: Title: Title: CFO ( ) Delete () Change () Addition GAMBORINO JR., ARMANDO Name: Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: ARMANDO GAMBORINO P 05/08/2007