2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# P06000152988

Entity Name: GSM FLORIDA GROUP, CORP.

Current Principal Place of Business:

3816 TREE TOP DR
WESTON, FL 33332

New Principal Place of Business:

645 N STATE RD 7
MARGATE, FL 33063

Current Mailing Address:

3816 TREE TOP DR
WESTON, FL 33332

New Mailing Address:

645 N STATE RD 7
MARGATE, FL 33063

FEI Number: 20-8048973 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAGANI, EDUARDO
3816 TREE TOP DR
WESTON, FL 33332 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

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:

Title: CEO ( ) Delete
Name: PAGAZANI, EDUARDO
Address: 3816 TREE TOP DR
City-St-Zip: WESTON, FL 33332

Title: TD ( ) Delete
Name: PAGAZANI, EDUARDO
Address: 3816 TREE TOP DR
City-St-Zip: WESTON, FL 33332

Title: D ( ) Delete
Name: MORATINOS, JOSE T
Address: 3816 TREE TOP DR
City-St-Zip: WESTON, FL 33332

Title: SD ( ) Delete
Name: MORATINOS, EDGAR E
Address: 3816 TREE TOP DR
City-St-Zip: WESTON, FL 33332

Title: D ( ) Delete
Name: GIRON, JUAN C
Address: 3816 TREE TOP DR
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: RENDON, JOSE L
Address: 645 N STATE RD 7
City-St-Zip: MARGATE, FL 33063

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.

SIGNATURE: EDUARDO PAGAZZANI P 05/04/2009

Electronic Signature of Signing Officer or Director Date