## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000018522

Entity Name: GAMEZ PROFESSIONAL DRILLING INC

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

Current Mailing Address: New Mailing Address:

FEI Number: 20-8426982 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:

GAMEZ, LUIS M
520 3 ST
0COFF FI 34761 US
GROVEI AND FI 34736 U

OCOEE, FL 34761 US GROVELAND, FL 34736 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: LUIS M. GAMEZ 04/16/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition GAMEZ, LUIS M Name: Name: GAMEZ, LUIS M 520 3 ST 115 E PATTERSON ST Address: Address: City-St-Zip: OCOEE, FL 34761 City-St-Zip: GORVELAND, FL 34736

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 GAMEZ, BRIJIDO
 Name:
 GAMEZ, BRIJIDO

 Address:
 520 3 ST
 Address:
 115 E PATTERSON ST

 City-St-Zip:
 OCOEE, FL 34761
 City-St-Zip:
 GROVELAND, FL 34736

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 GAMES, SILVINO
 Name:
 GAMEZ, SILVINO

 Address:
 115 E. PATTESON STREET
 Address:
 115 E PATTESON STREET

 City-St-Zip:
 GROVELAND, FL 34736
 City-St-Zip:
 GROVELAND, FL 34736

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: LUIS M. GAMEZ P 04/16/2008