2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000018754

Entity Name: GABEL SE WEL FEL INC

FILED Apr 15, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

6289 W SUNRISE BLVD - APT 250 6289 W SUNRISE BLVD - APT 123 PLANTATION, FL 33313

PLANTATION, FL 33313

New Mailing Address:

Current Mailing Address:

6289 W SUNRISE BLVD - APT 123 6289 W SUNRISE BLVD - APT 250

PLANTATION, FL 33313 PLANTATION, FL 33313

FEI Number: 20-8432895 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:

ALCIME, FRANTZ 6289 W SUNRISE BLVD - APT 250 PLANTATION, FL 33313 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ETIENNE, VLADUMYR ETIENNE, VLADIMYR Name: Name:

275 SW 15TH ST - APT 108 275 SW 15TH ST - APT 108 Address: Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33060

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

Name: ALCIME, FRANTZ Name: ALCIME, FRANTZ 6289 W SUNRISE BLVD - APT 250 6289 W SUNRISE BLVD - APT 123 Address: Address:

PLANTATION, FL 33313 PLANTATION, FL 33313 City-St-Zip: City-St-Zip:

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

MOMPLAISIR, JAMES PATRICK, FABRE Name: Name:

15050 NE 20TH AVE - STE 113 15050 NE 20TH AVE - STE 103 Address: Address:

City-St-Zip: N MIAMI, FL 33181 City-St-Zip: N MIAMI, FL 33181

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

JUNIOR, MARCELLUS J GUERINO, SENATUS Name: Name: Address: 15050 NE 20TH AVE - STE 113 Address: 29 VARICKS HOME City-St-Zip: N MIAMI, FL 33181 City-St-Zip: NEWBURGH, NY 12250

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: FRANTZ ALCIME MR 04/15/2008