## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000034234

Entity Name: GO GSM, INC.

FILED Jun 04, 2008 Secretary of State

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

12550 BISCAYNE BLVD 3100 NW 72ND AVE SUITE 500 STE 110

NORTH MIAMI, FL 33181 US MIAMI, FL 33122

**Current Mailing Address: New Mailing Address:** 

180 AVONDALE CIRCLE 3100 NW 72ND AVE

NEWNAN, GA 30265 US STE 110 US

MIAMI, FL 33122

FEI Number: 20-8660132 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:

AMERICAN SAFETY COUNCIL, INC. SURIYA, SALEM 5125 ADANSON ST 5190 NW 167TH ST SUITE 500 STE 203

MIAMI, FL 33014 US ORLANDO, FL 32804 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: SALEM SURIYA 06/04/2008

> 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: **PVST** () Delete Title: **PVST** (X) Change ( ) Addition

Name: NELSON, MELISSA Name: NELSON, MELISSA 180 AVONDALE CIRCLE 3100 NW 72ND AVE STE 110 Address: Address: City-St-Zip: NEWNAN, GA 30265 US City-St-Zip: MIAMI, FL 33122 US

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

Name: NELSON, MELISSA Name: 180 AVONDALE CIRCLE Address: Address: NEWNAN, GA 30265 US City-St-Zip: City-St-Zip:

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: MELISSA NELSON PR 06/04/2008