

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000038854

FILED
Feb 26, 2008
Secretary of State

Entity Name: GMF MANAGEMENT CONSULTING, INC.

Current Principal Place of Business:

18501 PINES BLVD STE 201-H2
PEMBROKE PINES, FL 33029

New Principal Place of Business:

16251 SW 14TH STREET
PEMBROKE PINES, FL 33027

Current Mailing Address:

18501 PINES BLVD STE 201-H2
PEMBROKE PINES, FL 33029

New Mailing Address:

16251 SW 14TH STREET
PEMBROKE PINES, FL 33027

FEI Number: 20-8733154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GBS CONSULTANTS, INC.
18501 PINES BLVD STE 201-H2
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

GIUSTI, MARIA F
16251 SW 14TH STREET
PEMBROKE PINES, FL 33027 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: MARIA F GIUSTI

02/26/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPVP () Delete
Name: PAZ, MANUEL E
Address: 18501 PINES BLVD STE 201-H2
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DST () Delete
Name: PAZ, MANUEL E
Address: 18501 PINES BLVD STE 201-H2
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVP (X) Change () Addition
Name: PAZ, MANUEL E
Address: 16251 SW 14TH STREET
City-St-Zip: PEMBROKE PINES, FL 33027

Title: DST (X) Change () Addition
Name: PAZ, MANUEL E
Address: 16251 SW 14TH STREET
City-St-Zip: PEMBROKE PINES, FL 33027

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: MANUEL E. PAZ

DPVP

02/26/2008

Electronic Signature of Signing Officer or Director

Date