2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000075328

Entity Name: GRAY STAR INVESTMENTS, INC.

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business: 8797 20TH STREET VERO BEACH, FL 32966 Current Mailing Address: 3601 WEST BURLEIGH BLV TAVARES, FL 32778			New Principal Place	New Principal Place of Business: 3601 WEST BURLEIGH BLVD TAVARES, FL 32778 New Mailing Address: 3601 WEST BURLEIGH BLVD TAVARES, FL 32778	
			New Mailing Address		
FEI Number	: 26-0463686	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
621 17TH VERO BE	ACH, FL 32960		purpose of changing its registere	d office or registered agent, or both,	
in the State	e of Florida.				
SIGNATU					
	Electroni	c Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	DST () PATEL, VINOD (8797 20TH STRI VERO BEACH, F	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DP () PATEL, RAMESH 8797 20TH STRI VERO BEACH, F	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () PATEL, THAKOF 8797 20TH STRI VERO BEACH, F	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () PATEL, DHANSU 8797 20TH STRI VERO BEACH, F	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: MICHAEL VASSELL D 01/20/2009

City-St-Zip: TAVARES, FL 32778