2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000045516

Entity Name: GABRIELA ENGELS INC

FILED Apr 30, 2011 Secretary of State

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

450 N. PARK ROAD 450 N. PARK ROAD 300

804

HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

450 N. PARK ROAD 450 N. PARK ROAD

300

HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021

FEI Number: 26-2549692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ENGELS, GABRIELA M ENGELS, GABRIELA M 450 N. PÁRK ROAD 450 N. PÁRK ROAD SUITE 300

SUITE 804

HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021 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: GE 04/30/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

ENGELS, GABRIELA M Name: 450 N. PARK ROAD, 300 Address: City-St-Zip: HOLLYWOOD, FL 33021

Title: VΡ

Name: ENGELS, GABRIELA M 450 N. PARK ROAD, #300 Address: HOLLYWOOD, FL 33021 City-St-Zip:

Title:

ENGELS, GABRIELA M Name: 450 N. PARK ROAD, #300 Address: City-St-Zip: HOLLYWOOD, FL 33021

Title:

ENGELS, GABRIELA M Name: Address: 450 N. PARK ROAD, #300 City-St-Zip: HOLLYWOOD, FL 33021

I hereby 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 all other like empowered.

SIGNATURE: GABRIELA ENGELS **PRES** 04/30/2011