

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000086580

Entity Name: GAMA TRANSPORT, INC.

FILED  
Apr 29, 2011  
Secretary of State

**Current Principal Place of Business:**

8280 SUNRISE LAKES BLVD.  
APT 104  
SUNRISE, FL 333221550 US

**New Principal Place of Business:**

**Current Mailing Address:**

8280 SUNRISE LAKES BLVD.  
APT 104  
SUNRISE, FL 333221550 US

**New Mailing Address:**

FEI Number: 27-3741949

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THE LEGAIR LAW FIRM, P.A.  
1601 N PALM AVE  
SUITE 307  
PEMBROKE PINES, FL 33026 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FERNANDEZ, MAX D  
Address: 8280 SUNRISE LAKES BLVD APT 104  
City-St-Zip: SUNRISE, FL 333221550 US

Title: S  
Name: FERNANDEZ, MAX D  
Address: 8280 SUNRISE LAKES BLVD APT 104  
City-St-Zip: SUNRISE, FL 333221550 US

Title: T  
Name: FERNANDEZ, MAX D  
Address: 8280 SUNRISE LAKES BLVD APT 104  
City-St-Zip: SUNRISE, FL 333221550 US

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: MAX FERNANDEZ

P

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date