

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000087463

**Entity Name:** GAM SPORTING GOODS, INC.

**FILED**  
**Apr 04, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5157 INTERNATIONAL DR.  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

5161 INTERNATIONAL DR.  
ORLANDO, FL 32819

**New Mailing Address:**

**FEI Number:** 27-3778473

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSEMBERG, PABLO  
5161 INTERNATIONAL DR  
ORLANDO, FL 32819 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: ROSEMBERG, PABLO  
Address: 3625 WATERS EDGE DR  
City-St-Zip: ORLANDO, FL 32812 US

Title: OFF  
Name: COHEN, AARON G  
Address: 4571 COMBER DR.  
City-St-Zip: ENCINO, CA 91316 US

Title: OFF  
Name: COHEN, ISAAC M  
Address: 4854 TARA DR  
City-St-Zip: ENCINO, CA 91432 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: PABLO ROSEMBERG

P

04/04/2011

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

\_\_\_\_\_  
Date