2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000070325

Entity Name: GAMO REALTY, INC.

Address:

Title:

Name: Address:

City-St-Zip:

City-St-Zip:

MARCO ISLAND, FL 34145

GAVIRIA, JUAN IGNACIO

MARCO ISLAND, FL 34145

1208 ORANGE COURT

(X) Delete

FILED Mar 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: % ROBERT CLAUSEN 247 N. COLLIER BLVD STE 103 MARCO ISLAND, FL 34145 **New Mailing Address: Current Mailing Address:** % ROBERT CLAUSEN PO BOX 429 MARCO ISLAND, FL 34146 FEI Number: 65-0446287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CLAUSEN, ROBERT 1201 ORANGE CT MARCO ISLAND, FL 34145 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition GAVIRIA, JUAN A GAVIRIA, JUAN I Name: Name: 1208 ORANGE COURT 1208 ORANGE COURT Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145 Title: DS Title: DS (X) Change () Addition () Delete DE GAVIRIA, NOELIA M Name: Name: MONTOYA, NOELIA 1208 ORANGE COURT 1208 ORANGE COURT Address: Address: MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145 City-St-Zip: City-St-Zip: () Delete Title: Title: VPT (X) Change () Addition VΡ GAVIRIA, MARIA A GAVIRIA, MARIA A Name: Name: 1208 ORANGE COURT 1208 ORANGE COURT

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

MARCO ISLAND, FL 34145

() Change () Addition

SIGNATURE: NOELIA MONTOYA DS 03/17/2008