

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000075000

Entity Name: GISMO, INC.

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

GISMO, INC.  
1251 TAYLOR LANE EXT  
LEHIGH ACRES, FL 33970 US

## **New Principal Place of Business:**

1251 TAYLOR LANE EXT  
SUITE 5D  
LEHIGH ACRES, FL 33936 US

## **Current Mailing Address:**

GISMO, INC.  
PO BOX 208  
LEHIGH ACRES, FL 33970 US

## **New Mailing Address:**

FEI Number: 65-0447323      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ECKERL, JOHANN  
1251 TAYLOR LANE EXT.  
5D  
LEHIGH ACRES, FL 33972 US

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

ECKERL, JOHANN  
1251 TAYLOR LANE EXT.  
5D  
LEHIGH ACRES, FL 33936 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

04/28/2011

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: ECKERL, JOHANN  
Address: 1251 TAYLOR LANE EXT., STE 5D  
City-St-Zip: LEHIGH ACRES, FL 33936

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: JOHANN ECKERL

PRES

04/28/2011

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

\_\_\_\_\_  
Date