2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000039297

Jan 30, 2006 Secretary of State

FILED

Entity Name: G.A. INTERNATIONAL ELECTRONICS OF FLORIDA CORP.

Current Principal Place of Business: New Principal Place of Business: 825 BRICKELL BAY DRIVE STE 1845 TOWER 3 MIAMI, FL 33131 **New Mailing Address: Current Mailing Address:** 825 BRICKELL BAY DRIVE STE 1845 TOWER 3 MIAMI, FL 33131 FEI Number: 65-0501176 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: OLBRICH, GUNTER OLBRICH, GUNTER C/O GA INT ELECTRONICS OF FL C/O GA INT ELECTRONICS OF FL CORP TOWER 3 STE 1845 825 BRICKELL BAY DR TOWER 3 STE 1845 825 BRICKELL BAY DR MIAMI, FL 33131 US MIAMI, FL 33131 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: 01/30/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition OLBRICH, GUNTER Name: Name: 720 NE 69TH ST 24N Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: OLBRICH, STEFANIE Name: OLBRICH, STEFANIE 1235 NE 82 ST 1235 NE 82 ST Address: Address: MIAMI, FL 33138 MIAMI, FL 33138 City-St-Zip: City-St-Zip: Title: Title: STD () Delete () Change () Addition OLBRICH, BIRGIT Name: Name: 720 NE 69TH ST 24N Address: Address: City-St-Zip: MIAMI, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: STEFANIE OLBRICH ATD 01/30/2006