
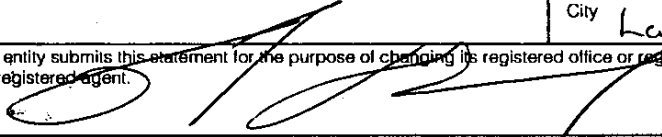


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90015 031 \*\*\*150.00

<b>DOCUMENT # P95000054570</b>					
<b>1. Entity Name</b> <b>GUGEL MANAGEMENT CORP.</b>					
<b>Principal Place of Business</b> <b>510 W. LAS OLAS BLVD.</b> <b>FORT LAUDERDALE, FL 33312 US</b>			<b>Mailing Address</b> <b>P.O. BOX 976</b> <b>AUBURNDALE, FL 33823 US</b>		
<b>2. Principal Place of Business - No P.O. Box #</b> <b>P.O. Box 976</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b> <b>Auburndale FL.</b>		<b>City &amp; State</b>			
<b>Zip</b> <b>33823</b>		<b>Country</b> <b>Polk</b>		<b>Zip</b>	
<b>Country</b>		<b>4. FEI Number</b> <b>59-3338743</b>			
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b>  <b>GUGEL, DONALD C</b> <b>610 W. LAS OLAS BLVD.</b> <b>FORT LAUDERDALE, FL 33312</b>			<b>7. Name and Address of New Registered Agent</b> <b>Name</b> <u>Victor Troiano, ESA</u> <b>Street Address (P.O. Box Number is Not Acceptable)</b> <u>317 S. Tennessee Ave</u> <b>City</b> <u>Lakeland</u> <b>FL</b> <b>Zip Code</b> <u>33801</u>		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
<b>SIGNATURE</b> 				<b>DATE</b> <u>4-17-07</u>	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <b>Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>P</b> <b>GUGEL, DONALD C</b> <b>610 W. LAS OLAS BLVD.</b> <b>FORT LAUDERDALE, FL 33312</b>	<input type="checkbox"/> Delete			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>P</b> <b>Gugel, Donald C</b> <b>P.O. Box 976</b> <b>Auburndale, FL 33823</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			

**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

