2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# P96000037063

Entity Name: G.I. AFFILIATES, INC.

Current Principal Place of Business:

2140 W. 68 STREET
SUITE 305
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 56-0624
MIAMI, FL 33256

New Mailing Address:

FEI Number: 65-0684876 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PADILLA, VICTOR JR.
2140 W. 68 STREET
SUITE 305
HIALEAH, FL 33016 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MADERAL, RAO
Address: 2140 W 68TH STREET #305
City-St-Zip: HIALEAH, FL 33016

Title: D ( ) Delete
Name: PINA, GEMA
Address: 2140 W 68TH STREET #305
City-St-Zip: HIALEAH, FL 33016

Title: P ( ) Delete
Name: PADILLA JR, VICTOR
Address: 2140 W 68TH STREET #305
City-St-Zip: HIALEAH, FL 33016

Title: D ( ) Delete
Name: CASTANEDA, JORGE X
Address: 2140 W 68TH STREET #305
City-St-Zip: HIALEAH, FL 33016

Title: D ( ) Delete
Name: AVILA, ALICIA
Address: 2140 W 68TH ST #305
City-St-Zip: HIALEAH, FL 33016

Title: D ( ) Delete
Name: MARTINEZ, JOSE J
Address: 2140 W 68TH ST #305
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: RAO MADERAL PRES 04/14/2009

Electronic Signature of Signing Officer or Director — Date