## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000044111

701 BRICKELL AVE.,#1900

MIAMI, FL 33131

Address:

City-St-Zip:

FILED May 15, 2007 Secretary of State

Entity Nar	ne: G.D.P. IN	IVESTMENTS, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
891 HARB KEY BISCA	OR DRIVE AYNE, FL 331	49			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
891 HARB KEY BISCA	OR DRIVE AYNE, FL 331	49			
FEI Number:	65-0818453	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address of (	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
QUESADA, LYDIA C 475 BILTMORE WAY SUITE 300 CORAL GABLES, FL 33134 US			QUESADA, LYDIA C 396 ALHAMBRA CIR. SUITE 210 CORAL GABLES, FL 3	396 ALHAMBRA CIR.	
	named entity of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				05/15/2007	
	Electro	nic Signature of Registered Age	ent	Date	
		03(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( PARKER, GEN 891 HARBOR KEY BISCAYN	DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	CASTRO, FED	VE., 3RD FLOOR, STE 3-400	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	VP ( LACASA, ARM	) Delete ANDO	Title: Name:	( ) Change ( ) Addition	

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:

City-St-Zip:

SIGNATURE: GENARO DELGADO PARKER D 05/15/2007