2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019699

Title:

Name:

Address:

City-St-Zip:

CD

ARAI, RONEN

TAMARAC, FL 33321

() Delete

7431 N UNIVERSITY DR # 201

Entity Name: G.I. CONSULTANTS INVESTMENTS, INC.

FILED Apr 07, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7431 N. UNIVERSITY DR., #201 TAMARAC, FL 33321 **Current Mailing Address: New Mailing Address:** 7431 N. UNIVERSITY DR., #201 TAMARAC, FL 33321 FEI Number: 65-0258099 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: LAVENDER, JOEL R ESQ. 507 S.E. 11TH CT. FT. LAUDERDALE, FL 33316 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BITMAN, STEWART W Name: Name: 7431 N. UNIVERSITY DR., #201 Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: Title: () Delete () Change () Addition Name: DIAMOND, KENNETH L Name: 7431 N. UNIVERSITY DR., #201 Address: Address: TAMARAC, FL 33321 City-St-Zip: City-St-Zip: Title: Title: TD () Delete () Change () Addition ROSS, BARRY Name: Name: 7431 N. UNIVERSITY DR., #201 Address: Address: City-St-Zip: TAMARAC, FL 33321 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: STEWART W BITMAN PD 04/07/2008

() Change () Addition