

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000084273

FILED
Apr 25, 2006
Secretary of State

Entity Name: GAIRA BAY, INC.

Current Principal Place of Business:

3971 S.W. 8 STREET
SUITE 305
MIAMI, FL 33134

New Principal Place of Business:

3971 S.W. 8 STREET
SUITE 305
MIAMI, FL 331342951

Current Mailing Address:

3971 S.W. 8 STREET
SUITE 305
MIAMI, FL 33134

New Mailing Address:

3971 S.W. 8 STREET
SUITE 305
MIAMI, FL 331342951

FEI Number: 65-0952436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOSA, GUILAINE LAMAR ESQ
3971 S.W. 8 STREET
SUITE 305
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

GUILAINE LAMAR SOSA, P.A.
3971 S.W. 8 STREET
SUITE 305
MIAMI, FL 331342951 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: GUILAINE LAMAR SOSA, ESQ.

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VIVES, CARLOS
Address: 3971 S.W. 8 STREET, SUITE 305
City-St-Zip: MIAMI, FL 331342951

Title: VPD () Delete
Name: SOSA, RAFAEL E
Address: 3971 S.W. 8 STREET, SUITE 305
City-St-Zip: MIAMI, FL 331342951

Title: SD () Delete
Name: DE VIVES, HERLINDA G
Address: 3971 S.W. 8 STREET, SUITE 305
City-St-Zip: MIAMI, FL 331342951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: VIVES, CARLOS A
Address: 3971 S.W. 8 STREET, SUITE 305
City-St-Zip: MIAMI, FL 331342951

Title: DVS (X) Change () Addition
Name: VIVES, HERLINDA M
Address: 3971 S.W. 8 STREET, SUITE 305
City-St-Zip: MIAMI, FL 331342951

Title: DT (X) Change () Addition
Name: SOSA, RAFAEL E
Address: 3971 S.W. 8 STREET, SUITE 305
City-St-Zip: MIAMI, FL 331342951

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: RAFAEL E. SOSA

T

04/25/2006

Electronic Signature of Signing Officer or Director

Date