2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S45497

Entity Name: G.S.F. INVESTMENT, CO.

FILED Apr 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8319 GRAND CANAL DR MIAMI, FL 33144 US

Current Mailing Address: New Mailing Address:

8319 GRAND CANAL DR MIAMI, FL 33144 US

FEI Number: 65-0260244 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:

FAGUNDO, GILBERTO S

8319 GRAND CANAL DRIVE

MIAMI, FL 33144 US

FAGUNDO, GILBERTO S PRES

8319 GRAND CANAL DRIVE

MIAMI, FL 33144 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: GILBERTO S FAGUNDO 04/11/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 FAGUNDO, GILBERTO S
 Name:
 FAGUNDO, GILBERTO S PRES

 Address:
 8319 GRAND CANAL DRIVE
 Address:
 8319 GRAND CANAL DRIVE

City-St-Zip: MIAMI, FL 33144 City-St-Zip: MIAMI, FL 33144

 Title:
 VSD () Delete
 Title:
 VSD (X) Change () Addition

 Name:
 FAGUNDO, CARMEN T
 Name:
 FAGUNDO, CARMEN T VPS

 Address:
 8319 GRAND CANAL DRIVE
 Address:
 8319 GRAND CANAL DRIVE

City-St-Zip: MIAMI, FL 33144 City-St-Zip: MIAMI, FL 33144

Title: D () Delete Title: D (X) Change () Addition Name: FAGUNDO, ALEJANDRO J D

 Address:
 9621 SW 59 TER
 Address:
 9621 SW 59 TER

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:
 MIAMI, FL 33173

Title: D () Delete Title: D (X) Change () Addition

 Name:
 LEAL, CARMEN M
 Name:
 LEAL, CARMEN M D

 Address:
 15930 W PRESTWICK PL
 Address:
 15930 W PRESTWICK PL

 City-St-Zip:
 MIAMI LAKES, FL 33014
 City-St-Zip:
 MIAMI LAKES, FL 33014

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: GILBERTO S FAGUNDO PRES 04/11/2009