## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000004646

**Entity Name: GBNET CORPORATION** 

FILED May 01, 2008 Secretary of State

848 BRICKELL AVE SUITE 1205 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

2285 COLUMBIA WESTON, FL 33326

FEI Number: 87-0645084 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:

LEON, LYNETTE 2285 COLUMBIA WESTON, FL 33326

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

US

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: SECR (X) Change () Addition

 Name:
 MEDINA, LUIS A
 Name:
 MEDINA, LUIS A

 Address:
 848 BRICKELL AVE
 Address:
 848 BRICKELL AVE

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 MIAMI, FL 33131

Title: T ( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 GERRARD, IAN B
 Name:
 KRIZNIC, IVANA

 Address:
 848 BRICKELL AVE, STE 1205
 Address:
 2222 JOURNET DR.

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 DUNN LORING, VA 22027

Title: COB ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 KAPAZZ, GEORGE M
 Name:
 BROOKS, BRIAN

 Address:
 848 BRICKELL AVE, STE 1205
 Address:
 1600 TYSONS BLVD

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 MCLEAN, VA 22102

Title: PCEO () Delete Title: CEO (X) Change () Addition

 Name:
 MARCHENA, JORGE
 Name:
 MORZORATI, LYNN

 Address:
 848 BRICKELL AVE
 Address:
 4814 THOMAS AVE. SO

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 MINNEAPOLIS, MN 55410

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: LYNETTE LEON AGEN 05/01/2008