

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 22, 2004
Secretary of State**

DOCUMENT# N01000007366

Entity Name: GLOBAL HUMANITARIA, CORP.

Current Principal Place of Business:

2222 PONCE DE LEON BLVD.
SUITE 303
CORAL GABLES, FL 33134 US

New Principal Place of Business:

New Mailing Address:

PO BOX 347852
CORAL GABLES, FL 33234 US

Current Mailing Address:

2222 PONCE DE LEON BLVD.
SUITE 303
CORAL GABLES, FL 33134 US

FEI Number: 30-0015737 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CRAIG, BARRY G
200 SOUTH BISCAYNE BOULEVARD
SUITE 4000
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

HERNANDEZ & TACORONTE, P.A.
8500 WEST FLAGLER ST
SUITE 208
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: MIGUEL HERNANDEZ, C.P.A. 01/22/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ARGUDO, ANDRES TORRES
Address: C/ VALENCIA 560, PRIMER PISO
City-St-Zip: BARCELONA, SPAIN, 08026

Title: D () Delete
Name: CALVO, ANGELICA R
Address: C/ VALENCIA 560, PRIMER PISO
City-St-Zip: BARCELONA, SPAIN, 08026

Title: D () Delete
Name: ARGUDO, MARIA ANGELES T
Address: C/ VALENCIA 560, PRIMER PISO
City-St-Zip: BARCELONA, SPAIN, 08026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDRES TORRES ARGUDO PRES 01/22/2004
Electronic Signature of Signing Officer or Director Date