2004 FOR PROFIT CORPORATION

ANNUAL REPORT



DOCUMENT # P0000005810

Principal Place of Business 9050 PINES BLVD

GLOBAL BUSINESS, CORP.

Mailing Address 9050 PINES BLVD FILED Apr 30, 2004 8:00 am Secretary of State

04-30-2004 90368 027 ***150.00

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SUITE 450-8 PEMBROKE PINES, FL 33024 SUITE 450-8 PEMBROKE PINES, FL 33024						 	(ile 88) ii 88) ii 88) ii 88)	N 88% 881 8 1.911	LI IDIQI UZII ERI	1886 11 (68)
2. Principal Place of Business 3.			3. Mailing Address	. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc	Suite, Apt. #, etc.			Chg-P	CR2E03	34 (10/03)	
City & State			City & State	City & State			125		 	plied For t Applicable
Zip Country			Zip	Zip Count		5. Certificate of			8.75 Add	itional
	6. Name	and Address of Current	Registered Agent			7. Name and A	ddress of New R	Registered A	gent	
BRICENO, NAYARIT C/O BW AND E BUSINESS ADVISERS INC 9050 PINES BLVD #450 PEMBROKE PINES, FL 33024					Name Street Addre	ss (P.O. Box Number	is Not Acceptable	9)		
		••••						FL	Zip Code	• · · · · · · · · · · · ·
	named entity ions of registe	y submits this statement for ered agent.	or the purpose of chang	ging its register	ed office or regi	stered agent, or both,	in the State of Fig	orida. I am fi	amiliar with,	and accept
SIGNATURE_	Signature typed.	or printed name of registered agent	and title it applicable	(NOTE: Registere	d Agent signature reg	juired when reinstating)		DATE		
	og alba typoo			(110.12.11030000		prod the constant)		-		
		FEE IS \$150.00 4 Fee will be \$550.	1 7	Campalgn Finar d Contribution.	ncing , (\$5.00 May Be Added to Fees				
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFF	ICERS AND	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1938 S CC	D, TATIANA DNFERENCE DR JTON, FL 33486	☐ Delet	NAM Stri					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT CARRILLO 1938 S CO	·	Delete	NAM STRE	1				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP			□ Deleti	NAM Stre	i				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-2IP			☐ Delete	e TITLI NAM Stre	E				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP			□ Delete	NAM STRE	i	4477			Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	entify that the	e information supplied wit	Detetion this filing does not gu	NAM Stri City	EET ADORESS -ST-ZIP	Section 119.07/3kii	Florida Statutes.	I further cert	Change	Addition

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	by-	Tatiana	Carrello	_
	SIGNA1	TURE AND TYPED OR PRINT	ED NAME OF SIGNING OFFICER	OR DIRECTOR

4-23-04

Daytime Phone #