2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State DOCUMENT # P03000078983 07-26-2004 90005 045 ***550.00 GLOBAL FINANCIAL GROUP USA, INC. Mailing Address Principal Place of Business **リスリリスリリリ** 5601 SW 75TH AVENUE 5601 SW 75TH AVENUE MIAMI, FL 33143 MIAMI, FL 33143 2. Principal Place of Business 3. Mailing Address 3735 SW 8 Street 3735 SW 8 Street Suite, Apt. #, etc. Suite, Apt. #, etc. 07212004 Cha-P CR2E034 (10/03) 101 101 City & State City & State 4. FEI Number Applied For Coral Gables, Coral Gables, FL 20-0134436 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33134 US 33134 Fee Required US 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Pereira, Mayte PERERIA, MAYTE Street Address (P.O. Box Number is Not Acceptable) **5601 SW 75TH AVENUE** 3735 SW 8 Street MIAMI, FL: 33143 # 101 City submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept agent. 8. The above nar the obligation Mayte Pereira, Vicepresident 7/21/04 SIGNATURE (NOTE: Registered Agent signature required when reinstating) or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. PD TITLE ☐ Change ☐ Addition TITLE Delete PEREIRA, MAYTE NAME NAME STREET ADDRESS 5601 SW 75TH AVENUE STREET ADDRESS MIAMI, FL 33143 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change ☐ Addition TITLE PEREIRA, MAYTE NAME STREET ADDRESS 5601 SW 75TH AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33143 CITY-ST-ZIP ~ - Delete TITLE . . . :Change X Addition DILE Stewart, Reynold NAME NAME 5601 SW 75th Avenue STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Miami, FL 33143 ☐ Delete TITLE ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information surplied with this filing does not qualify 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 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 impowered 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 a fractions with all other like empowered.

7/21/04

(305) 648-3862

Mayte Pereira

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Jul 26, 2004 8:00 am