## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 20, 2006 8:00 am Secretary of State

ANNUAL REPURI				Secretary of State				
DOCUMENT # P03000078983				02-20-2006 90058 012 ***150.00				
1. Entity Name				02-2	0-2006 90058 (	л2 ***150.	.00	
GLOBAL FINANCIAL GROUP USA, INC.								
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Principal Place	e of Business	Mailing Address		┪,				
Principal Place of Business Mailing Address 3735 SW 8 STREET 3735 SW 8 STREET								
CORAL GABLES, FL 33134 CORAL GABLES, FL 33134								
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2 Principal P	lace of Business	3. Mailing Address						
	ONCE DE LEON Blud	770 PONCE US	Leon Bloo		USINI BONI OENI OEKNI MENU	TERRET CHILLING BEARD AND		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1	g-P CR2E	E034 (11/05)		
# 30	01	#30/			· · · · · · · · · · · · · · · · · · ·			
City & State	hables, A.	Cofal Gables	$\mathcal{A}$	4. FEI Number 20-0134436		<del></del>	plied For t Applicable	
Zip	Country	Zip   C	ountry			\$8.75 Add		
33/.	34   Û.S.P.	33/34	V.S.A.	5. Certificate of Status	Desired	Fee Required		
	6. Name and Address of Current i	Registered Agent		7. Name and Addres	s of New Registered	d Agent		
Name  PEDEDIA MAYTE								
PERERIA, MAYTE 3735 SW 8 STREET S				Street Address (P.O. Box Number is Not Acceptable)				
# 101				<u> </u>				
CORAL G	ABLES, FL 33134							
		City		F	L Zip Code	•		
8. The above	named entity submits this statement for	the purpose of changing its regi	stered office or registe	ered agent, or both, in the	State of Florida. I a	m familiar with,	and accept	
. the obligat	tions of registered agent.							
SIGNATURE.	<u> </u>							
	Signature, typed or printed name of registered agent a	and title If applicable. (NOTE: Reg	istered Agent signatura require	ed when reinstating)	DATE			
: `		9. Election Campaign F	inancina <b>t</b> i	5.00 May Be				
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	T 10		ded to Fees				
1 St. 19				A DELTICATE (CLIANIC	EC TO OFFICERS A	ND DIDECTOR	2 (6) 4 4	
10.77 S	PD OFFICERS AND	Delete	TITLE	ADDITIONS/CHANG	ES TO OFFICERS A	Change	Addition	
NAME	PEREIRA, MAYTE	C Detate	NAME			C Overigo		
STREET ADDRESS	5601 SW 75TH AVENUE		STREET ADDRESS					
CITY-ST-ZIP	MIAMI, FL 33143		CITY-ST-ZIP				_	
TITLE		Delete	TITLE			☐ Change	Addition	
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		^ I	STREET ADDRESS					
CITY-ST-ZIP	$\cap$	Λ	STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental eporties 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 trusted 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 addless with all other like empowered.

SIGNATURE:\*

MINTED NAME OF SIGNING OFFICER OR DIRECTOR

×02-02-06 × 305648386

Daytime Phone #