

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000103474

FILED
Apr 17, 2007
Secretary of State

Entity Name: GLOBAL SHIPPING SOLUTIONS, INC.

Current Principal Place of Business:

220 S LAWSONA BLVD
ORLANDO, FL 32801

New Principal Place of Business:

2875 DELANEY AVE
ORLANDO, FL 32806 US

Current Mailing Address:

PO BOX 532064
ORLANDO, FL 32853 US

New Mailing Address:

PO BOX 560925
ORLANDO, FL 32856 US

FEI Number: 59-3546821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTRAM, JAMES H
220 S LAWSONA BLVD
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BARTRAM, JAMES H
Address: 220 S LAWSONA BLVD
City-St-Zip: ORLANDO, FL 32801

Title: VS () Delete
Name: BARTRAM, NANCY H
Address: 220 S LAWSONA BLVD
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JAMES H BARTRAM

PDT

04/17/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date