

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007366

**FILED**  
**Mar 09, 2014**  
**Secretary of State**  
**CC4367045962**

**Entity Name:** GLOBAL HUMANITARIA, CORP.

**Current Principal Place of Business:**

2355 SALZEDO ST  
SUITE 307  
CORAL GABLES, FL 33134

**Current Mailing Address:**

PO BOX 347852  
CORAL GABLES, FL 33234 US

**FEI Number: 30-0015737**

**Certificate of Status Desired: Yes**

**Name and Address of Current 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            D  
Name            ARGUDO, ANDRES TORRES  
Address        2355 SALZEDO ST 307  
City-State-Zip: CORAL GABLES FL 33134

Title            T  
Name            TRINIDAD, ALFONSO  
Address        2355 SALZEDO ST 307  
City-State-Zip: CORAL GABLES FL 33134

Title            S  
Name            GONZALEZ, MARCOS  
Address        2355 SALZEDO ST 307  
City-State-Zip: CORAL GABLES FL 33134

Title            O  
Name            MELENDEZ, ALMA  
Address        2355 SALZEDO ST 307  
City-State-Zip: CORAL GABLES FL 33134

*I hereby 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 all other like empowered.*

**SIGNATURE: ALMA MELENDEZ**

**OFFICE**

**03/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date