

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 06, 2004 8:00 am
Secretary of State

05-06-2004 90173 011 ***150.00

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1. Entity Name
WILLOW GLOBAL SERVICES CORP.



Principal Place of Business

**4804 HIGHLAND DRIVE
TAMARAC, FL 33319**

Mailing Address

**4804 HIGHLAND DRIVE
TAMARAC, FL 33319**

24071786



05012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2563161

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**PITTER, CARL S
7435 NORTH WEST 57TH STREET
TAMARAC, FL 33319**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTSD
NAME	SWANSTON, NEIL T
STREET ADDRESS	4804 HIGHLAND DRIVE
CITY - ST - ZIP	TAMARAC, FL 33319
TITLE	VD
NAME	SWANSTON, SELWYN
STREET ADDRESS	4804 HIGHLAND DRIVE
CITY - ST - ZIP	TAMARAC, FL 33319
TITLE	DIRECTOR
NAME	CARL S. PITTER
STREET ADDRESS	7435 NORTH WEST 57th STREER
CITY - ST - ZIP	TAMARAC, FLORIDA 33319
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied 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 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 an other like empowered.

SIGNATURE: ☒

Carl S. Pitter

CARL S. PITTER

4/30/2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #