

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F07000002950

1. Entity Name
GLOBAL TALENT SERVICES, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

09 APR 15 PM 2:57

Principal Place of Business
1425 COLLINS AVE
MIAMI, FL 33139

Mailing Address
10 UNIVERSAL CITY PLAZA
UNIVERSAL CITY, CA 91608



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03272009 REIN-P CR2E098 (1/07)

4. FEI Number
26-0214007

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
MORRIS, DOUGLAS P
1755 BROADWAY
NEW YORK, NY 10019 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Asst Secy
Brian B. Taylor
800 3rd AV - Tax 3 Floor
New York NY 10022 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COO
HOROWITZ, ZACHARY I
2220 COLORADO AVE
SANTA MONICA, CA 90404 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Asst Secy
Robert Moseley
800 3rd AV
New York NY 10022 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFO
HENNYITZ, MARINUS N
1755 BROADWAY
NEW YORK, NY 10019 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Asst Secy
Robert Moseley
800 3rd AV
New York NY 10022 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVPD
CIONGOLI, CHARLES C
2220 COLORADO AVE
SANTA MONICA, CA 90404 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVPD
OSTROFFI, MICHAEL
2220 COLORADO AVE
SANTA MONICA, CA 90404 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVPD
OSTROFFI, MICHAEL
2220 COLORADO AVE
SANTA MONICA, CA 90404 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVPD
OSTROFFI, MICHAEL
2220 COLORADO AVE
SANTA MONICA, CA 90404 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP
NAGANO, NEIL
2220 COLORADO AVE
SANTA MONICA, CA 90404 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP
NAGANO, NEIL
2220 COLORADO AVE
SANTA MONICA, CA 90404 ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

SIGNATURE:

Brian Taylor 3/27/09 2125727324

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Asst Secy