

Florida Department of State
Division of Corporations
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FOREIGN PROFIT/NONPROFIT CORPORATION
GLOBALCONN INTERNATIONAL. C.L. CORP

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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2023 OCT -6 PM 4:27

FLORIDA
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FL

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 TALLAHASSEE, FL

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Corporate Filing Menu

Help

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. GLOBALICONN INTERNATIONAL, S.L. CORP
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. QUITO - ECUADOR 3. N/A
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/06/2020 5. 50 YEARS
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 15619 South West 112 DR. MIAMI-FL-33196
(Principal office address)

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: PATRICIO JARAMILLO

Office Address: 15614 S.W. 112 DR.

MIAMI, Florida 33196
(City) (Zip code)

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9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: ANDREAS DEGETAU
Address: ARUPOS 117 Y ACACIAS URB
JACARANDA - QUITO - ECUADOR
Vice Chairman: ERNESTO FLORES
Address: PASAJE HIGUEL ANGEL DE 4-82 Y JFKENEDY

Director: CONSUELO LOZA
Address: AV. PEREZ GUERRERO DE 3-75
QUITO - ECUADOR ZIP CODE 170150
Director: _____
Address: _____

B. OFFICERS

President: _____
Address: _____

Vice President: _____
Address: _____

Secretary: _____
Address: _____

Treasurer: _____
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. CONSUELO DEL CARMEN LOZA CIFUENTES
(Typed or printed name and capacity of person signing application)

SRI

Ecuadorian Internal Revenue Services

Certificate**COMPANY NAME**

GLOBALICONN INTERNATIONAL CL

IRS Number

1793108806001

Legal Representative

• LOZA CIFUENTES CONSUELO DEL CARMEN

Estatus

ACTIVO

Category

RIMPE - ENTREPENUR

Registration date

04/01/2021

Date of activation

02/04/2022

Beginning of activities

04/01/2021

Registration date

30/07/2020

Date of activation

02/04/2022

Stop activities

do not register

Jurisdicción

ZONA 9 / PICHINCHA / QUITO

Needs to keep accounting

NO

Kind

SOCIETIES

retention agent?

NO

Special considerations

NO

Tributary Address**Location**

Province: PICHINCHA Cantón: QUITO Sector: ALANGASI

Address

Sector: AMERICA Street: AV. PEREZ GUERRERO Number: OE-3-75 Intersection: AV. AMERICA Reference: DIAGONAL UNIVERSIDAD CENTRAL

Contacts

Celular: 0997003450 Work Phone: 022544042 Email: consueloloza@outlook.com

Activities

• G46499601 - DISTRIBUTION OF HOUSEHOLD IMPLEMENTS. AND ANY OTHER LEGAL ACTIVITY

OPEN COMMERCIAL**LOCATIONS**

1

Closed

0

Tributary Obligations

• 2021 - SEMESTRAL DECLARACIÓN IVA

NAME

GLOBALICONN INTERNATIONAL CL

IRS NUNMBER

1793108806001



Las obligaciones tributarias reflejadas en este documento están sujetas a cambios. Revise periódicamente sus obligaciones tributarias en www.sri.gob.ec.

Previews IRS Numbers

No registry



Verification Code:

RCR1096622397925174

Emission Date:

05 of October 2023 11:13

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Validez del certificado: El presente certificado es válido de conformidad a lo establecido en la Resolución No. NAC-DGERCGC15-00000217, publicada en el Tercer Suplemento del Registro Oficial 462 del 19 de marzo de 2015, por lo que no requiere sello ni firma por parte de la Administración Tributaria, mismo que lo puede verificar en la página transaccional SRI en línea y/o en la aplicación SRI Móvil.