5/1/05

FILED

2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Apr 25, 2005 8:00 am Secretary of State **DOCUMENT # F97000000681** 1. Entity Name 04-25-2005 90276 035 ***150.00 GLOBAL RISK CONSULTANTS CORP. Principal Place of Business Mailing Address **100 WALNUT AVENUE** 100 WALNUT AVENUE **20040004** 5TH FLOOR 5TH FLOOR CLARK, NJ 07066 **CLARK, NJ 07066** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01052005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 34-1733739 No: Applicable Zip Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **C T CORPORATION SYSTEM** 1200 SOUTH PINE ISLAND ROAD Street Accress (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 Zip Çode 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Sperime, lyoed or printed name of registered agent and it ell applicable (NCTE: Registered Agent signature required when rematteing) CATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DC. TILE ☐ Delete T.T.E Addition Chance RAMONAS, W.F. おかる HAVAG STREET ADDRESS 99 WOOD AVE. SQ. STREET ADDRESS CTY-ST-ZP **ISELIN, NJ 08830** CTY-S1-ZIP TILE DT ☐ Detete FILE ☐ Charge ■ Addition DIMAURO, G NAVIE STEFFET ADDRESS 99 WOOD AVE, SQ. STREET ADDRESS CTY-ST-ZIP **ISELIN, NJ 08830** CTY-ST-7/2 ☐ Delete TIFLE TT. F ☐ Chance □ Addition GILES, GH HAVE HAVE STREET ADDRESS 99 WOOD AVE. SQ. STREET ADDRESS CITY-ST-ZIP ISELIN, NJ 08830 CITY-ST-ZIP TILE **EVR** ☐ Delete TT.E ☐ Chance Addition HASAF LOWELL, DAVID NAME STREET ADDRESS 100 WALNUT AVE. 5TH FLOOR STREET ADDRESS CTY-ST-ZP **CLARK, NJ 07066** CTY-ST-ZP TITLE Delete TITLE ☐ Change Addition BARNHOUSE, DE MANAE STEET APPEASS 6940 SOUTH EDGEWATER ROAD STEET ADDRESS CTY-ST-ZIP BRECKSVILLE, OH 44141 CTY-ST-7P TITLE ☐ Delete TITLE ☐ Change Addition MANE NAVÆ STREET ADDRESS STEET ADDRESS CTY-ST-ZP 12. Thereby certify that the information supplied with this filling 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 un address, with all other like empowered.