

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 09, 2000 8:00 am
Secretary of State

02-09-2000 90216 023 ***150.00

DOCUMENT # F98000001001

1. Entity Name

GLOBAL TC SOLUTIONS, INC.

Principal Place of Business % EDWIN COOPERMAN 17651 LAKE ESTATES DRIVE BOCA RATON FL 33496	Mailing Address % EDWIN COOPERMAN 17651 LAKE ESTATES DRIVE BOCA RATON FL 33496-1425
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2. Principal Place of Business TC Solutions, Inc Suite, Apt. #, etc. 70 Falmouth St. City & State Short Hills, N.J. Zip 07078 Country USA	3. Mailing Address TC Solutions Suite, Apt. #, etc. 70 Falmouth St. City & State Short Hills, New Jersey Zip 07078 Country USA	4. FEI Number 65-0768481	Applied Not Applied
6. Name and Address of Current Registered Agent TERRY, EUGENE 17759 LAKE ESTATES DR. BOCA RATON FL 33496		7. Name and Address of New Registered Agent	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent TERRY, EUGENE 17759 LAKE ESTATES DR. BOCA RATON FL 33496		7. Name and Address of New Registered Agent	
		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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** inlay Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC COOPERMAN, EDWIN 17651 LAKE ESTATES DR. BOCA RATON FL 33496 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCT TERRY, EUGENE 17759 LAKE ESTATES DR. BOCA RATON FL 33496 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COOPERMAN, E. 17651 LAKE ESTATES DR. BOCA RATON FL 33496 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/>
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13. 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 11 or Block 12, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edwin Cooperman **561**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: 1/20/2000 Daytime Phone #: 237-2217