

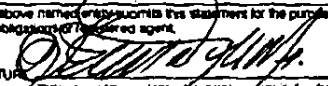
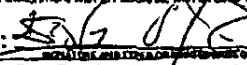
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FILE NO2000001195
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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Amended

2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02000001195			
1. Entity Name GLOBAL CHAMBER OF COMMERCE, INC.			
Principal Place of Business 8050 SW 132ND COURT MIAMI, FL 33183		Mailing Address 8050 SW 132ND COURT MIAMI, FL 33183	
2. Principal Place of Business 1712 West Flagler St.		3. Mailing Address 1712 West Flagler St.	
City & State Miami Florida		City & State Miami Florida	
Zip 33135		Country USA	
4. FEI Number		Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VILLARREAL, JOSEFINA C 8050 SW 132ND COURT MIAMI, FL 33183		7. Name and Address of New Registered Agent Name Juan Davila Street Address (P.O. Box Number, if Not Applicable) 7374 NW 35th Terrace City Miami, FL Zip Code 33122	
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 obligation of the registered agent.			
SIGNATURE 		Juan Davila 4/29/03	
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO SANTISTEBAN, CARLOS A SILVA 9050 SW 132ND COURT MIAMI, FL 33183 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President/Director Jacques Bernateau P.O. Box 524211 Miami, FL 33152 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SO ROSEBROUGH, GLORIA 1836 SW 102ND COURT MIAMI, FL 33165 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Treasurer Juan Davila P.O. Box 524211 Miami, FL 33152 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VILLARREAL, JOSEFINA C 8050 SW 132ND COURT MIAMI, FL 33183 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied in this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statute. 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 617, 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 the empowered.			
SIGNATURE: 		Carlos Alberto Silva-Santisteban 4/29/03 (305) 643-8783	

90130744



CHECK HERE IF MAKING CHANGES

05/03/03 (10/02)

6/9
ad