

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003274

FILED
Apr 08, 2004
Secretary of State

Entity Name: GLOBAL DIVERSITY ALLIANCE, INC.

Current Principal Place of Business:

10005 S.W. 2ND TERRACE
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

10005 S.W. 2ND TERRACE
MIAMI, FL 33174

New Mailing Address:

FEI Number: 02-0625245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LICKO, CAROL A
1111 BRICKELL AVE STE 1900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NUNES, FRED
Address: 14907 RUNNING RIDGE LANE
City-St-Zip: SILVER SPRING, MD 209061954

Title: TD () Delete
Name: IANNI, DINO
Address: 940 LOGAN STREET
City-St-Zip: DENVER, CO 80203

Title: D () Delete
Name: PRICE, CHRISTOPHER
Address: 10005 SW 2 TERRACE
City-St-Zip: MIAMI, FL 33174

Title: SD () Delete
Name: PRICE, ANDREA
Address: 668 OGDEN STREET
City-St-Zip: DENVER, CO 80218

Title: D () Delete
Name: LAMBIOTTE, JOELLEN
Address: NINE GALEN STREET
City-St-Zip: WATERTON, MA 02472

Title: D () Delete
Name: STANTON, JEFFREY
Address: 1825 2ND AVE. SOUTH #312
City-St-Zip: MINNEAPOLIS, MN 55403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER PRICE

D

04/08/2004

Electronic Signature of Signing Officer or Director

Date

MOM, FRANS
HELMERSPLANTEON 9
1054 RZ
AMSTERDAM, THE NETHERLANDS

BILLINGS, DEBORAH
IPAS MEXICO
PACHUCA 92, COLONIA CONDESA
MEXICO DF, CP 06140, MEXICO