## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N02000003274

Entity Name: GLOBAL DIVERSITY ALLIANCE, INC.

FILED Apr 24, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 10005 S.W. 2ND TERRACE MIAMI, FL 33174 **Current Mailing Address: New Mailing Address:** 10005 S.W. 2ND TERRACE MIAMI, FL 33174 FEI Number: 02-0625245 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LICKO, CAROL A 1111 BRICKELL AVE STE 1900 MIAMI, FL 33131 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition NUNES, FRED Name: NUNES, FRED Name: 14907 RUNNING RIDGE LANE Address: 14907 RUNNING RIDGE LANE Address: City-St-Zip: SILVER SPRINGS, FL 209061954 City-St-Zip: SILVER SPRING, MD 209061954 Title: TD ( ) Delete Title: () Change () Addition Name: IANNI, DINO Name: Address: 940 LOGAN STREET Address: City-St-Zip: DENVER, CO 80203 City-St-Zip: Title: () Delete Title: () Change () Addition PRICE, CHRISTOPHER Name: Name: 10005 SW 2 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33174 City-St-Zip: Title: SD ( ) Delete Title: () Change () Addition Name: PRICE, ANDREA Name: 668 OGDEN STREET Address: Address: City-St-Zip: **DENVER, CO 80218** City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition LAMBIOTTE, JOELLEN Name: Name: NINE GALEN STREET Address: Address: City-St-Zip: City-St-Zip: WATERTON, MA 02472 Title: () Delete Title: ( ) Change (X) Addition STANTON, JEFFREY Name: Name: Address: Address: 1825 2ND AVE. SOUTH #312 MINNEAPOLIS, MN 55403 City-St-Zip: 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 04/24/2003

MOM, FRANS HELMERSPLANTEON 9 1054 RZ AMSTERDAM, THE NETHERLANDS

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