

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012668

FILED
May 01, 2009
Secretary of State

Entity Name: GLOBE TROTTER GROUP CARE, INC.

Current Principal Place of Business:

1075 NW 123RD STREET
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

1075 NW 123RD STREET
MIAMI, FL 33168

New Mailing Address:

FEI Number: 06-1801591 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SASSINE, M. CLAUDE
1075 NW 123RD STREET
MIAMI, FL 33168 US

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: D () Delete
Name: BATAILLE, FRANTZ MD
Address: 165-27 85TH AVE
City-St-Zip: JAMAICA ESTATES, NY 11432

Title: D () Delete
Name: SAINCLAIR, ETHEL
Address: 28 NW 154TH STREET
City-St-Zip: MIAMI, FL 33161

Title: D () Delete
Name: SAINTELIEN, WISLER
Address: 1141 NE 142ND STREET
City-St-Zip: MIAMI, FL 33161

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: FRANTZ BATAILLE, MD

DIR

05/01/2009

Electronic Signature of Signing Officer or Director

Date