

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005108

1. Entity Name

THE GLOBAL GROUP, TRAINING & CONSULTING, INC.

Principal Place of Business

11246 SW 160TH CT.
MIAMI FL 33196

Mailing Address

POST OFFICE BOX 972504
MIAMI FL 33197

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0954676

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WRIGHT, PHILOMENA E
11246 SW 160TH CT.
MIAMI FL 33196

PHILOMENA

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD - PRESIDENT
NAME WRIGHT, PHILOMENA E
STREET ADDRESS 11246 SW 160 COURT
CITY-ST-ZIP MIAMI FL 33196 ☐ Delete

TITLE DIRECTOR
NAME WRIGHT, LAVARD W
STREET ADDRESS 11246 SW 160 COURT
CITY-ST-ZIP MIAMI FL 33196 ☐ Delete

TITLE DIRECTOR
NAME WRIGHT, WILLIAM
STREET ADDRESS 2024 S. 23RD AVENUE
CITY-ST-ZIP BROADVIEW IL ☒ Delete

TITLE DIRECTOR
NAME ADDEH, PATRICK
STREET ADDRESS 3542 DEAN DRIVE #K6
CITY-ST-ZIP HYATTVILLE MD 20782 ☐ Delete

TITLE DIRECTOR
NAME COPELAND, BISHOP C.
STREET ADDRESS 255 N.E. 39 COURT
CITY-ST-ZIP POMPANO BEACH FL 33064 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DIRECTOR
NAME OGHINAN, PAUL A.
STREET ADDRESS 8006 S.W. 149 AVE. APT. # D207
CITY-ST-ZIP MIAMI, FL 33193 ☐ Change ☒ Addition

TITLE TREASURER
NAME WRIGHT, LAVARD W.
STREET ADDRESS 11246 S.W. 160 COURT
CITY-ST-ZIP MIAMI, FL 33196 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 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 like empowered.

SIGNATURE:

SIGNATURE OF REGISTERED AGENT: PHILOMENA WRIGHT

4/24/01 305 383 6008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2007 (10/00)