2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 08:00 AM
Secretary of State

DOCUMENT # **P00000038635**

1. Entity Name
GLOBAL INSURANCE TECHNOLOGY, INC.

Principal Place of Business	Mailing Address
% MICHAEL WEISS & ASSOCIATES, P.A. 1401 BRICKLL AVENUE, SUITE 300 MIAMI FL 33132	% MICHAEL WEISS & ASSOCIATES, P.A. 1401 BRICKLL AVENUE, SUITE 300 MIAMI FL 33132

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
GLOBAL INSURANCE TECHNOLOGY, INC.		GLOBAL INSURANCE TECHNOLOGY, INC.	
Suite, Apt. #, etc. 700 N. HIATUS RD. #205		Suite, Apt. #, etc. 700 N. HIATUS RD. #205	
City & State PEMBROKE PINES FL		City & State PEMBROKE PINES FL	
Zip 33026	Country	Zip 33026	Country

4. FEI Number **65-1019508** ☐ 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
WEISS MICHAEL NESQ. WEISS & HERNANDEZ, P.A. 1401 BRICKELL AVENUE, SUITE 300 MIAMI FL 33132 US	Name: GUZMAN ANTONIO JCEO Street Address (P.O. Box Number is Not Acceptable): GLOBAL INSURANCE TECHNOLOGY, INC. 700 N. HIATUS RD. #205 City: PEMBROKE PINES **FL** Zip Code: 33026

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 **ANTONIO J. GUZMAN** **03/08/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARIN RICARDO % 1401 BRICKELL AVENUE, #300 MIAMI FL 33131	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARIN RICARDO 700 N. HIATUS RD. #205 PEMBROKE PINES FL 33026	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUZMAN ANTONIO % 1401 BRICKELL AVENUE, #300 MIAMI FL 33131	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUZMAN ANTONIO J 700 N. HIATUS RD. #205 PEMBROKE PINES FL 33026	☒ 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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (11/00)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTONIO J. GUZMAN D 03/08/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #