

05-21-2001 90359 031 \*\*\*158.75

DOCUMENT # P00000058613

### 1. Entry Name

FIRST GLOBAL SOLUTIONS OF SOUTH FLORIDA, INC.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <b>Principal Place of Business</b><br>6280 NW 186 ST. #114<br>MIAMI LAKES, FL.<br>33015                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                  | <b>Mailing Address</b><br>6280 NW 186 ST. #114<br>MIAMI LAKES, FL.<br>33015                                             |                        | <div style="background-color: black; width: 100px; height: 20px; margin: 0 auto;"></div> <div style="background-color: black; width: 100px; height: 20px; margin: 0 auto;"></div>                                     |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>2. Principal Place of Business</b><br>8515 NW 29 ST.<br><small>Suite, Apt. #, etc.</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                  | <b>3. Mailing Address</b><br>8515 NW 29 ST.<br><small>Suite, Apt. #, etc.</small>                                       |                        | DO NOT WRITE IN THIS SPACE                                                                                                                                                                                            |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>City &amp; State</b><br>MIAMI, FL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                  | <b>City &amp; State</b><br>MIAMI, FL.                                                                                   |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Zip</b><br>33122                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Country</b><br>DADE                                           | <b>Zip</b><br>33122                                                                                                     | <b>Country</b><br>DADE | <b>4. FEI Number</b><br>65-1029971                                                                                                                                                                                    |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                  |                                                                                                                         |                        | <b>Applied For</b><br><input type="checkbox"/> Not Applicable                                                                                                                                                         |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>6. Name and Address of Current Registered Agent</b><br>ROGERS STEPHANIE<br>1031 IVES DRIVE ROAD<br>BLDG 4 SUITE 230<br>N. MIAMI BEACH, FL 33179                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                  |                                                                                                                         |                        | <b>7. Name and Address of New Registered Agent</b><br>Name: <u>MAURICIO SIERRA</u><br>Street Address (P.O. Box Number is Not Acceptable):<br><u>8515 NW 29 Street</u><br>City: <u>MIAMI</u> FL Zip Code: <u>33122</u> |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>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.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| SIGNATURE: <u>[Signature]</u> <span style="float: right;">04/30/2001</span><br><small>(Signature, typed or printed name of registered agent and fee if applicable. (P.O. Box Number is Not Acceptable. (P.O. Box Number is Not Acceptable. (P.O. Box Number is Not Acceptable.)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>9. This corporation is eligible to qualify as a franchise</b><br>Taxing requirements and effects to do so.<br>(See brochure on back) <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                  | <b>FILE NOW! FEE IS \$150.00</b><br>After MAY 1, 2001 Fee will be \$350.00<br>Make Check Payable to Department of State |                        | <b>10. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                                                                                        |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>11. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                  |                                                                                                                         |                        | <b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IF:</b>                                                                                                                                                            |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> <b>TITLE</b><br/>NAME<br/>STREET ADDRESS<br/>CITY - ST - ZIP             </td> <td style="width: 50%;"> <input type="checkbox"/> Delete             </td> </tr> <tr> <td> <b>P</b><br/>MAURICIO SIERRA<br/>6280 NW 186 ST. #114<br/>MIAMI LAKES, FL. 33015             </td> <td> <input type="checkbox"/> Delete             </td> </tr> <tr> <td> <b>ALFREDO GUERRERO</b><br/>6280 NW 186 ST. #114<br/>MIAMI LAKES, FL. 33015             </td> <td> <input type="checkbox"/> Delete             </td> </tr> <tr> <td> <b>VICTOR M TORRES</b><br/>6280 NW 186 ST. #114<br/>MIAMI LAKES, FL. 33015             </td> <td> <input type="checkbox"/> Delete             </td> </tr> <tr> <td> <b>[Blank]</b> </td> <td> <input type="checkbox"/> Delete             </td> </tr> <tr> <td> <b>[Blank]</b> </td> <td> <input type="checkbox"/> Delete             </td> </tr> <tr> <td> <b>[Blank]</b> </td> <td> <input type="checkbox"/> Delete             </td> </tr> <tr> <td> <b>[Blank]</b> </td> <td> <input type="checkbox"/> Delete             </td> </tr> </table> |                                                                  |                                                                                                                         |                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                             | <input type="checkbox"/> Delete | <b>P</b><br>MAURICIO SIERRA<br>6280 NW 186 ST. #114<br>MIAMI LAKES, FL. 33015 | <input type="checkbox"/> Delete | <b>ALFREDO GUERRERO</b><br>6280 NW 186 ST. #114<br>MIAMI LAKES, FL. 33015 | <input type="checkbox"/> Delete | <b>VICTOR M TORRES</b><br>6280 NW 186 ST. #114<br>MIAMI LAKES, FL. 33015 | <input type="checkbox"/> Delete | <b>[Blank]</b> | <input type="checkbox"/> Delete | <b>[Blank]</b> | <input type="checkbox"/> Delete | <b>[Blank]</b> | <input type="checkbox"/> Delete | <b>[Blank]</b> | <input type="checkbox"/> Delete | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> <b>TITLE</b><br/>NAME<br/>STREET ADDRESS<br/>CITY - ST - ZIP             </td> <td style="width: 50%;"> <input type="checkbox"/> Change <input type="checkbox"/> Address             </td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table> |  | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Address |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>P</b><br>MAURICIO SIERRA<br>6280 NW 186 ST. #114<br>MIAMI LAKES, FL. 33015                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>ALFREDO GUERRERO</b><br>6280 NW 186 ST. #114<br>MIAMI LAKES, FL. 33015                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>VICTOR M TORRES</b><br>6280 NW 186 ST. #114<br>MIAMI LAKES, FL. 33015                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> Delete                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <b>[Blank]</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>[Blank]</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Address |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <b>13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(2)(b), Florida Statutes. I further certify that the information is true and correct 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 recorder of business performance; and that my name appears in Block 11 or Block 12 changed, or on an attachment hereto, with all necessary approvals.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| SIGNATURE: <u>[Signature]</u> <span style="float: right;">04/30/2001 305 629 8670</span><br><small>SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                  |                                                                                                                         |                        |                                                                                                                                                                                                                       |                                 |                                                                               |                                 |                                                                           |                                 |                                                                          |                                 |                |                                 |                |                                 |                |                                 |                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                           |                                                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |