2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# P00000100969

Entity Name: GLOBAL HUMAN CAPITAL SOLUTIONS, INC.

Current Principal Place of Business:

1580 SAWGRASS CORPORATE PARKWAY
SUITE 130
SUNRISE, FL 33323

New Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY
4TH FLOOR
SUNRISE, FL 33323

Current Mailing Address:

1580 SAWGRASS CORPORATE PARKWAY
SUITE 130
SUNRISE, FL 33323

New Mailing Address:

1560 SAWGRASS CORPORATE PARKWAY
4TH FLOOR
SUNRISE, FL 33323

FEI Number: 65-1061509 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JARAMILLO, LUIS F
4021 TURQUOISE TRAIL
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: JARAMILLO, LUIS F
Address: 4021 TURQUOISE TRAIL
City-St-Zip: WESTON, FL 33331

Title: VD (X) Delete
Name: MUCINO, ALEJANDRO
Address: 3435 PINEWALK DRIVE NORTH #107
City-St-Zip: MARGATE, FL 33063

Title: STD ( ) Delete
Name: MONICA DE LOS RIOS,
Address: 4653 NW 12 ST.
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: JARAMILLO, LUIS F
Address: 1560 SAWGRASS CORPORATE PARKWAY 4TH FLOOR
City-St-Zip: SUNRISE, FL 33323

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change ( ) Addition
Name: MONICA DE LOS RIOS,
Address: 1560 SAWGRASS CORPORATE PARKWAY 4TH FLOOR
City-St-Zip: SUNRISE, FL 33323

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS FERNANDO JARAMILLO P 04/29/2004

Electronic Signature of Signing Officer or Director — Date