

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000102648

1. Entity Name

TSI GLOBAL ALLIANCE CORP.



05 OCT -2 01:10:18

Principal Place of Business

1215 W NEWPORT CTR DR
DEERFIELD BEACH, FL 33442

Mailing Address

1215 W NEWPORT CTR DR
DEERFIELD BEACH, FL 33442



07102006

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

02-0538447

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARKATIA, MOHAMMED A
1215 W NEWPORT CTR DR
DEERFIELD BEACH, FL 33442

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
PCEO
MARKATIA, MOHAMMED
STREET ADDRESS
1215 W NEWPORT CTR DR
CITY - ST - ZIP
DEERFIELD BEACH, FL 33442

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

700080692577
10/10/06--01067--021 **558.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

M. Markatia CEO

6/27/06 954-418-8620