

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010988

FILED  
Jan 09, 2006  
Secretary of State

Entity Name: GLOBAL PROFESSIONAL SERVICES, INC.

## Current Principal Place of Business:

3125 LA COSTA CIRCLE  
304  
NAPLES, FL 34105

## New Principal Place of Business:

4220 HAMPTON LN  
NAPLES, FL 34119

## Current Mailing Address:

3125 LA COSTA CIRCLE  
304  
NAPLES, FL 34105

## New Mailing Address:

4220 HAMPTON LN  
NAPLES, FL 34119

FEI Number: 06-1609673

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUEÑAS, BEATRIZ  
3125 LA COSTA CIRCLE  
304  
NAPLES, FL 34105 US

## Name and Address of New Registered Agent:

DUEÑAS, BEATRIZ  
4220 HAMPTON LN  
NAPLES, FL 34119 US

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:

01/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PDS ( ) Delete  
Name: DUEÑAS, BEATRIZ  
Address: 3125 LA COSTA CIRCLE  
City-St-Zip: NAPLES, FL 34105

Title: TD ( ) Delete  
Name: BERNAL, LUIS  
Address: 3125 LA COSTA CIRCLE  
City-St-Zip: NAPLES, FL 34105

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change ( ) Addition  
Name: DUEÑAS, BEATRIZ  
Address: 4220 HAMPTON LN  
City-St-Zip: NAPLES, FL 34119

Title: TD (X) Change ( ) Addition  
Name: BERNAL, LUIS  
Address: 4220 HAMPTON LN  
City-St-Zip: NAPLES, FL 34119

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: BEATRIZ DUEÑAS

PDS

01/09/2006

Electronic Signature of Signing Officer or Director

Date