

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

'03 APR 16 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P01600032569

1. Corporation Name

GLOBAL FINANCIAL HOLDINGS INC

2. Principal Office Address

16050 NE 8TH COURT

3. Mailing Office Address

Suite, Apt. #, etc.

Suite # 1

Suite, Apt. #, etc.

City & State

North Miami Beach FL

City & State

Zip

33168

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03-30-2001

5. FEI Number

65-1100835

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$87.50 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Raymond Jean - Philippe

Street Address (P.O. Box Number is Not Acceptable)

16050 NE 8TH COURT

Suite, Apt. #, Etc.

400016126354

04/16/03--01071--007 **300.00

City

North Miami Beach

State

FL

Zip Code

33162

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Raymond Jean Philippe
REGISTERED AGENT MUST SIGN

Date 4-7TH 2003

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	Raymond Jean-Philippe	16050 NE 8 TH COURT N MIAMI BEACH FL	North miami beach fl 33162

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Raymond Jean Philippe
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

Date

(786) 274-7090

Daytime Phone #

CR2E081 (10/02)