2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000086273

Entity Name: GLOBAL FINANCIAL GROUP OF SOUTH FLORIDA, INC.

FILED Mar 26, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1750 UNIVERSITY DRIVE SUITE 107 1750 UNIVERSITY DRIVE CORAL SPRINGS, FL 33071 SUITE 107

CORAL SPRINGS, FL 33071

Current Mailing Address: New Mailing Address:

1750 UNIVERSITY DRIVE SUITE 107

CORAL SPRINGS, FL 33071

1750 UNIVERSITY DRIVE
SUITE 107

CORAL SPRINGS FL 33071

CORAL SPRINGS, FL 33071

FEI Number: 65-1135857 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US WOMELDORPH, HOWARD R CPA 7648 LOCKWOOD RIDGE ROAD SARASOTA, FL 34243 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: HOWARD R. WOMELDORPH, JR., CPA 03/26/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 GUCCIARDI, THOMAS
 Name:

 Address:
 1750 UNIVERSITY DRIVE SUITE 107
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:

Title: VTD () Delete Title: () Change () Addition

 Name:
 MESSER, IVAN
 Name:

 Address:
 1750 UNIVERSITY DRIVE SUITE 107
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:

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: THOMAS GUCCIARDI P 03/26/2004