

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000091414

1. Entity Name  
GLOBAL HOLDINGS ENTERPRISES, INC.



**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91880 001 \*1,200.00

0214522 AV

Principal Place of Business  
C/O NICOLE J. HUESMANN, P.A.  
3001 SW 3RD AVE  
MIAMI FL 33129

Mailing Address  
C/O NICOLE J. HUESMANN, P.A.  
3001 SW 3RD AVE  
MIAMI FL 33129



2. Principal Place of Business  
150 Ahambra Circle  
Suite, Apt. #, etc.  
1150

3. Mailing Address c/o Nicole J. Huesmann, P.A.  
150 Alhambra Circle  
Suite, Apt. #, etc.  
1150

☒ CHECK HERE IF MAKING CHANGES

City & State  
Coral Gables, Florida

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Coral Gables, Florida

4. FEI Number 65-1152352 Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

Zip Country Zip Country  
33134 USA 33134 USA

6. Name and Address of Current Registered Agent  
HUESMANN, NICOLE J  
3001 SW 3RD AVE  
MIAMI FL 33129

7. Name and Address of New Registered Agent  
Name  
Huesmann, Nicole J.  
Street Address (P.O. Box Number is Not Acceptable)  
150 Alhambra Circle  
Suite 1150  
City Coral Gables FL Zip Code 33134

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 *Nicole J. Huesmann* DATE 4/15/03  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TSENG, MEI NA 3001 SW 3RD AVE 3901 MIAMI FL 33139 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tseng, Mei Na 150 Alhambra Circle, Suite 1150 Coral Gables, Florida 33134 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

*Mei Na Tseng*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)