2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#

P02000011327

1. Entity Name

GLOBAL ENTERPRISES AND FINANCIAL PROJECTS, INC.



FILED Feb 06, 2003 8:00 am Secretary of State
02-06-2003 90083 010 ***150.00

Principal Plac 11716 SW 91 MIAMI FL 331		Mailing Address 11716 SW 91 TERRACE MIAMI FL 33186					
2. Principal Place of Business		3. Mailing Address		T ISBUINGER OUT CONTROL TO ALTH A	4864 ND111 ONINA 14881 11880 1111		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE	☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 27-000150	9	Applied For	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Ac Fee Requir	dditional red	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
MILLER, BROOKS 200 S. BISCAYNE BLVD., SUITE 1690 MIAMI FL 33131			Name Street Ad	Street Address (P.O. Box Number is Not Acceptable)			
			City		FL Zip Co-	de	
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							
Aftei	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	State		9. Election Campaign Fi Trust Furid Contribution		00 May/Be	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTOR	RS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RANCANO, CARLOS 5773 NW 116TH AVENUE, UNIT MIAMI FL 33178	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CICCIARELLI, JANET 11716 SW 91 TERRACE MIAMI FL 33186	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LISSARRAGUE, VIDAL 4001 NW 97TH AVENUE, SUITE MIAMI FL 33178	☐ Delete.	TITLE		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD REARDON, ERIC 15964 SW 151 TERRACE MIAMI FL 33196	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
TIFLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	i	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR