

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90423 033 ***150.00

DOCUMENT # P02000012321					
1. Entity Name GLOBAL CAPITAL CORPORATION					
Principal Place of Business 340 CROWN OAK CENTRE DR. LONGWOOD, FL 32750			Mailing Address 340 CROWN OAK CENTRE DR. LONGWOOD, FL 32750		
2. Principal Place of Business 160 International Pkwy Suite, Apt. #, etc. <i>Suite 100</i> City & State <i>Heathrow, Fla</i> Zip <i>32746</i> Country <i>USA</i>		3. Mailing Address 160 International Pkwy Suite, Apt. #, etc. <i>Suite 100</i> City & State <i>Heathrow, Fla</i> Zip <i>32746</i> Country <i>USA</i>			
4. FEI Number 75-2986375				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FRIEDLAND, JAMES 340 CROWN OAK CENTRE DR. LONGWOOD, FL 32750			7. Name and Address of New Registered Agent Name <i>Same</i> Street Address (P.O. Box Number is Not Acceptable) <i>160 International Parkway</i> Suite <i>100</i> City <i>Heathrow</i> State <i>FL</i> Zip Code <i>32746</i>		
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 <i>[Signature]</i> <i>James M. Friedland</i> DATE <i>4-29-05</i> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agents signature required when reinstating.)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 FRIEDLAND, JAMES 340 CROWN OAK CENTRE DR. LONGWOOD, FL 32750	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	160 International Parkway, Suite 100 Heathrow, Florida 32746	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<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: <i>[Signature]</i> <i>James M. Friedland</i> DATE <i>4-29-05</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

407-444-2706