2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000097427

Entity Name: GLOBAL LOSS CONSULTANTS INC.

FILED Nov 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10302 NW S RIVER SUITE B1 MEDLEY, FL 33178 **Current Mailing Address: New Mailing Address:** 10302 NW SOUTH RIVER DR. SUITE B1 MEDLEY, FL 33178 FEI Number: 55-0801547 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: PHIPPS, COLIN 10302 NW S RIVER DR SUITE B1 MEDLEY, FL 33178 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: Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: VP (X) Change () Addition Name: PHIPPS, COLIN Name: PHIPPS, COLIN

Address: 10302 NW SOUTH RIVER DR. SUITE B1 Address: 10302 NW SOUTH RIVER DR. SUITE B1

City-St-Zip: MEDLEY, FL 33178 City-St-Zip: MEDLEY, FL 33178 US

Title: () Delete Title: PRES () Change (X) Addition

Name: Name: CAMPAGNA, MIKE

Address: Address: 10302 NW SOUTH RIVER DRIVE

City-St-Zip: City-St-Zip: MEDLEY, FL 33178 US

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: MIKE CAMPAGNA PRES 11/05/2005