


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 10, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P02000110548</b> 1. Entity Name GLOBAL SUPPORT SYSTEMS, INC.	
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Principal Place of Business 5600 N.W. 36TH STREET, #561 MIAMI, FL 33122	Mailing Address P.O. BOX 661597 MIAMI SPRINGS, FL 33266
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**DO NOT WRITE IN THIS SPACE**



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0651235	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  SER JOBS FOR PROGRESS, INC., 5600 NW 36 ST # 561 MIAMI, FL 33122
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IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CELA, JOSE L 5600 NW 36 ST # 561 MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C TERRELONGE, RICHARD 12342 SW 140 ST MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC LLANO, DANIEL 1ST LT 14140 SW 40 TERR MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CARLOS, JULIA 4805 NW 7 ST APT 208 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/11/08-80006-020 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**   1/9/8 305-871-2820

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_