2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000110548

Title:

Name:

Address:

City-St-Zip:

Entity Name: GLOBAL SUPPORT SYSTEMS, INC

FILED Jan 14, 2009 Secretary of State

Entity Nam	ie: Global S	SUPPORT SYSTEMS, INC.					
Current Principal Place of Business:			New Principal Place of Business:				
5600 N.W. MIAMI, FL	36TH STREET 33122	·, #561					
Current Mailing Address:			New Mailing Address:				
P.O. BOX 6 MIAMI SPR	61597 INGS, FL 3326	66					
FEI Number:	20-0651235	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
5600 NW 3 # 561 MIAMI, FL	33122 US				-ee:	l4l.	
in the State		ubmits this statement for the pu	rpose of changing if	s registerea	οπice or registered agent, or	DOTN,	
SIGNATUR							
		c Signature of Registered Agen	t		Date		
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () I CELA, JOSE L 5600 NW 36 ST MIAMI, FL 3312		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	C () I TERRELONGE, I 12342 SW 140 S MIAMI, FL 3318	ST	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	VC () I LLANO, DANIEL 14140 SW 40 TE MIAMI, FL 3317	ERR	Title: Name: Address: City-St-Zip:	S (X BERUVIDES, 3121 SW 82 C MIAMI, FL 33	CT		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOSE L CELA PRES 01/14/2009

(X) Delete

CARLOS, JULIÁ

MIAMI, FL 33126

4805 NW 7 ST APT 208

() Change () Addition