

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125148

Entity Name: GLOBALCAPS, INC.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

20900 NE 30TH AVE STE 1003
MIAMI, FL 33180

New Principal Place of Business:

20900 NE 30TH AVENUE
SUITE 1003
AVENTURA, FL 33180

Current Mailing Address:

20900 NE 30TH AVE STE 1003
MIAMI, FL 33180

New Mailing Address:

20900 NE 30TH AVE STE 1003
AVENTURA, FL 33180

FEI Number: 56-2313099

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NASH, SALOMON
Address: 1301 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

Title: S () Delete
Name: NASH, CARLOS
Address: 1301 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NASH, SALOMON
Address: 20900 NE 30TH AVENUE, SUITE 1003
City-St-Zip: AVENTURA, FL 33180

Title: S (X) Change () Addition
Name: NASH, SALOMON
Address: 20900 NE 30TH AVENUE, SUITE 1003
City-St-Zip: AVENTURA, FL 33180

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.

SIGNATURE: SALOMON NASH

PD

01/14/2009

Electronic Signature of Signing Officer or Director

Date