2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000098296

Entity Name: GLOBAL CONNECTION EXPRESS INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	NNEDY BLVD	1			
SUITE C ORLANDO	D, FL 32810	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
243 W KE	243 W KENNEDY BLVD		13506 SUMMERPORT	13506 SUMMERPORT VILLAGE PKWY. # 360	
SUITE C	D, FL 32810	US	WINDERMERE, FL 34	WINDERMERE, FL 34786 US	
	: 90-0108592	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	f New Registered Agent:	
243 W KE SUITE C	A, AUGUST C NNEDY BLVD D, FL 32810 (
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
		nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	QUINTERO, VI 13506 SUMME) Delete CTOR M ERPORT VILLAGE PKWY #360 E, FL 34786 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MONTENEGRO	H AVENUE #402	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ROCHA, YOLII 13506 SUMME) Delete MA I ERPORT VILLAGE PKWY #360 E, FL 34786 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	BAQUERO, IS) Delete ABEL C H AVENUE #402	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: VICTOR M. QUINTERO P/D 04/27/2009

AVENTURA, FL 33180 US

City-St-Zip: