

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000016675

FILED
Jan 19, 2005
Secretary of State

Entity Name: GLOBAL FAIR TRADE CRAFTS INC.

Current Principal Place of Business:

2020 A HIBISCUS DR.
EDGEWATER, FL 32141 US

New Principal Place of Business:

Current Mailing Address:

2020 A HIBISCUS DR.
EDGEWATER, FL 32141 US

New Mailing Address:

FEI Number: 56-2430784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGAL ZOOM NEVADA, INC.
111 N.E. FIRST STREET
SUITE 901
MIAMI, FL 33132 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: PRES () Delete
Name: WARD, KEVIN
Address: 2020 A HIBISCUS DR.
City-St-Zip: EDGEWATER, FL 32141 US

Title: TREA () Delete
Name: JONES, RENICE
Address: 116 HAMILTON RD
City-St-Zip: EDGEWATER, FL 32132 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TREA (X) Change () Addition
Name: JONES, RENICE
Address: 2020 A HIBISCUS
City-St-Zip: EDGEWATER, FL 32141 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: RENICE M. JONES

TREA

01/19/2005

Electronic Signature of Signing Officer or Director

_____ Date