

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90335 025 \*\*\*150.00

DOCUMENT # P05000046555

1. Entity Name  
GLOBAL MARKETING 500, INC.



Principal Place of Business  
P. O. BOX 771  
GONZALEZ, FL 32560

Mailing Address  
P. O. BOX 771  
GONZALEZ, FL 32560

2. Principal Place of Business  
P.O. Box 367568  
Suite, Apt. #, etc.

3. Mailing Address  
P.O. Box 367568  
Suite, Apt. #, etc.

City & State  
Bonita Springs, FL  
Zip  
34136  
Country  
USA

City & State  
Bonita Springs, FL  
Zip  
34136  
Country  
USA

04262006 Chg-P CR2E034 (11/05)

4. FEI Number  
20-2584857  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SEARS, M. ANN  
6160 N. DAVIS HWY., SUITE 8  
PENSACOLA, FL 32504

7. Name and Address of New Registered Agent

Name  
Carlos E. Bravo  
Street Address (P.O. Box Number is Not Acceptable)  
11153 Colmbra Ln  
City  
Bonita Springs FL Zip Code  
34135

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

*[Signature]*

Signature, types or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04/26/06

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
President	Vesa J. Jarvisto	11153 Colmbra Ln	Bonita Springs - FL - 34135	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Vice President	Robert Collins	P.O. Box 367568	Bonita Springs, FL - 34136	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

04/26/06

(850) 377-3577