

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000030257

**FILED**  
**Apr 07, 2011**  
**Secretary of State**

**Entity Name:** GLOBAL NURSING ASSOCIATION, INC

**Current Principal Place of Business:**

6405 NW 36 ST  
SUITE # 226  
VIRGINIA GARDENS, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

6405 NW 36 ST  
SUITE # 226  
VIRGINIA GARDENS, FL 33166

**New Mailing Address:**

**FEI Number:** 83-0450168

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MANRUFO, DIANELIS  
4721 NW 7ST  
APT.# 405  
MIAMI, FL 33126 US

**Name and Address of New Registered Agent:**

MANRUFO, DIANELIS  
3242 SW 147 CT  
MIAMI, FL 33185 US

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: DIANELIS MANRUFO

04/07/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTS  
Name: MANRUFO, DIANELIS  
Address: 3242 SW 147 CT  
City-St-Zip: MIAMI, FL 33185

Title: VP  
Name: LABAUT, DAMARIS  
Address: 12546 NW 7 LN  
City-St-Zip: MIAMI, FL 33182

I hereby 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 all other like empowered.

SIGNATURE: DIANELIS MANRUFO

PTS

04/07/2011

Electronic Signature of Signing Officer or Director

Date