

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000097418

FILED
Apr 26, 2007
Secretary of State

Entity Name: GLOBAL INTERNATIONAL BUSINESS CONSULTING, INC

Current Principal Place of Business:

3370 NE 190 ST
APT # 608
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

3370 NE 190 ST
APT # 608
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 20-5256548 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELE, PATRICIA A
3370 NE 190 ST
APT # 608
AVENTURA, FL 33180 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: DP () Delete
Name: MELE, PATRICIA A
Address: 3370 NE 190 ST APT # 608
City-St-Zip: AVENTURA, FL 33180 US

Title: DVPS () Delete
Name: GARUFI, GIUSEPPE A
Address: 7738 LAKESIDE BLVD # 323
City-St-Zip: BOCA RATON, FL 33434

Title: DT (X) Delete
Name: GARCIA, GERARDO G
Address: CALLE CAMELIA 272 CASA 5 COLONIA FLA
City-St-Zip: DEL ALVARO OBREGON, DF CP01030 MX

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVPS (X) Change () Addition
Name: GONZALEZ GARCIA, GERARDO
Address: PEDRO SIMON LA PLACE 3948
City-St-Zip: ZAPOPAN, JA 45070 MX

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

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA A MELE

DP

04/26/2007

Electronic Signature of Signing Officer or Director

Date