

2007 FOR PROFIT CORPORATION ANNUAL REPORT


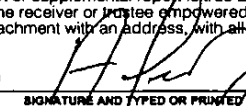
FILED
Jul 11, 2007 8:00 am
Secretary of State

04-09-2007 90041 007 ***150.00

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07092007 Chg-P CR2E034 (12/06)

DOCUMENT # P06000132949					
1. Entity Name GLOBAL CONSULTANT & MANAGEMENT CORP.					
Principal Place of Business 1410 SW 126 PL MIAMI, FL 33184			Mailing Address 1410 SW 126 PL MIAMI, FL 33184		
2. Principal Place of Business - No P.O. Box # 3480 SW 132 Court			3. Mailing Address 3480 SW 132 Court		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Miami, Florida			City & State Miami, Florida		
Zip 33175		Country Miami-Adel		4. FEI Number 20-5745293	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent LOPEZ, ARANELYS 1410 SW 126 PL MIAMI, FL 33184			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOPEZ, ARANELYS 1410 SW 126 PL MIAMI, FL 33184 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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: 			Aranelys Lopez President 7/9/07 (305) 968-9408		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

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ATTACHMENT

Bank of America



Online Banking

Business Economy Chk - 8321 : Check Image

Check Image:

GLOBAL CONSULTANT & MANAGEMENT CORP.
1410 S.W. 125TH PL.
MIAMI, FL 33184-2310

1041
60033270
Date 3/20/67
BS 4/30 FL 1962

Pay to the Order of U.S. Dept of State \$ 150.00
Certo circunstanter dollar 150.00
Bank of America   ATM

ACH R/T 063100277
For PO40000132949 OFF
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