2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000042140

Entity Name: GLOBAL MARKETING SOLUTIONS USA CORPORATION

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1515 N. MARION ST 2ND FLOOR 1515 N. MARION ST 2ND FLOOR 2ND FLOOR

TAMPA, FL 33612 US TAMPA, FL 33602 US

Current Mailing Address: New Mailing Address:

1515 N. MARION ST 1515 N. MARION ST

2ND FLOOR 2ND FLOOR

TAMPA, FL 33612 US TAMPA, FL 33602 US

FEI Number: 80-0176548 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ERIKSEN, GREGORY R

4802 LONDONDERRY DR

TAMPA, FL 33647 US

DREAM VACATIONS

1515 N. MARION ST

TAMPA, FL 33602 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: SCOT ERIKSEN 03/25/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: AG (X) Change () Addition

 Name:
 ERIKSEN, SCOT M
 Name:
 ERIKSEN, SCOT

 Address:
 10428 LUCAY DR
 Address:
 1515 N. MARION ST

 City-St-Zip:
 TAMPA, FL 33647 US
 City-St-Zip:
 TAMPA, FL 33602 US

Title: VP (X) Delete Title: () Change () Addition

 Name:
 GRAGNANIELLO, THOMAS
 Name:

 Address:
 11024 SR 52
 Address:

 City-St-Zip:
 HUDSON, FL 34669 US
 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition

 Name:
 ERIKSEN, GREGORY R
 Name:

 Address:
 4802 LONDONDERRY DR
 Address:

 City-St-Zip:
 TAMPA, FL 33647 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SCOT ERIKSEN AG 03/25/2009