

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000094237

FILED
Mar 06, 2009
Secretary of State

Entity Name: GLOBAL-MED TECHNOLOGIES GROUP, INC.

Current Principal Place of Business:

421-A ST ARMANDA'S CIRCLE, 225
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

421-A ST ARMANDA'S CIRCLE, 225
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 26-3573986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R & A AGENTS, INC.
100 SE 3RD AVE., 8TH FLOOR
FT. LAUDERDALE, FL 33394 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: PCEO () Delete
Name: URBANSKI, MARK
Address: 15 PARADISE PLAZA, SUITE 108
City-St-Zip: SARASOTA, FL 34239

Title: DS () Delete
Name: URBANSKI, MARK
Address: 15 PARADISE PLAZA, SUITE 108
City-St-Zip: SARASOTA, FL 34239

Title: TD () Delete
Name: STOPANIO, ROBERT
Address: 3000 SW 4TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: URBANSKI, MARK
Address: 421-A ST ARMANDS CIRCLE, 225
City-St-Zip: SARASOTA, FL 34236

Title: DS (X) Change () Addition
Name: URBANSKI, MARK
Address: 421-A ST ARMANDS CIRCLE, 225
City-St-Zip: SARASOTA, FL 34236

Title: () Change () Addition
Name:
Address:
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: MARK URBANSKI

PRES

03/06/2009

Electronic Signature of Signing Officer or Director

_____ Date