

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000056545

**FILED**  
**Oct 20, 2010**  
**Secretary of State**

**Entity Name:** GLOBAL STRATEGIC DEVELOPERS INC.

**Current Principal Place of Business:**

8880 NW 20TH STREET STE M  
DORAL, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

8880 NW 20TH STREET STE M  
DORAL, FL 33172

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

INNISS, CARL  
8880 NW 20TH STREET STE M  
DORAL, FL 33172    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: CARL INNIS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MAJEED, ABDOOL H  
Address: 104-74 127TH ST  
City-St-Zip: SOUTH RICHMOND HILL, NY 11419

Title: T  
Name: MARSHAL, LENOX H  
Address: 204 VALCOUR AVE  
City-St-Zip: UNIONDALE, NY 11553

Title: V  
Name: EDWARDS, KENNETH  
Address: 96-02 57TH AVE APT 8K REGO PARK  
City-St-Zip: QUEEN, FL 11368

Title: V  
Name: SIMMONS, CARDWELL  
Address: 186 SOUTH BAY AVE  
City-St-Zip: FREEPORT, NY 11520

Title: V  
Name: INNISS, CARL  
Address: 8880 NW 20TH STREET STE M  
City-St-Zip: DORAL, FL 33172

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: MAJEED ABDOOL

P

10/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date