

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
FILED

05/27/95 11:35

RECEIVED
TALLAHASSEE, FLORIDA

DOCUMENT # P92000013576 (3)

1. Corporation Name:

GLOBAL SUPPLY MERCHANTS, INC.

Principal Place of Business:

**8952 SW 142ND AVENUE
#1136
MIAMI FL 33186**

Mailing Address:

**P.O. BOX 160992
MIAMI FL 33116-0992**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/22/1992	3a. Date of Last Report 05/24/1994
4. FTT Number 65-0391035	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199 (2)(2) Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business:	2a. Mailing Address:
21. 8340 NW 56th ST.	26.
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. MIAMI FL	28.
24. 33166	29.
25. 	30.

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
81. Name		82. Street Address (P.O. Box Number is Not Acceptable)	
83. BOOS, DEREK F 8952 SW 142ND AVENUE SUITE 1136 MIAMI FL 33186		84. City	
		85. FL	
		86. Zip Code	

11. Pursuant to the provisions of Sections 607.05(2) and 607.150(4), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.150(5), Florida Statutes.

SIGNATURE: _____ (Print Name of Agent, Registered Agent, or Secretary of Corporation) _____ (Print Name of Registered Agent, Registered Agent, or Secretary of Corporation)

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	P BOOS, DEREK F 8952 SW 142 AVENUE MIAMI FL	1. NAME	☐ Change ☐ Addition
2. NAME		2. NAME	☐ Change ☐ Addition
3. NAME		3. NAME	☐ Change ☐ Addition
4. NAME		4. NAME	☐ Change ☐ Addition
5. NAME		5. NAME	☐ Change ☐ Addition
6. NAME		6. NAME	☐ Change ☐ Addition
7. NAME		7. NAME	☐ Change ☐ Addition
8. NAME		8. NAME	☐ Change ☐ Addition
9. NAME		9. NAME	☐ Change ☐ Addition
10. NAME		10. NAME	☐ Change ☐ Addition
11. NAME		11. NAME	☐ Change ☐ Addition
12. NAME		12. NAME	☐ Change ☐ Addition
13. NAME		13. NAME	☐ Change ☐ Addition
14. NAME		14. NAME	☐ Change ☐ Addition
15. NAME		15. NAME	☐ Change ☐ Addition
16. NAME		16. NAME	☐ Change ☐ Addition
17. NAME		17. NAME	☐ Change ☐ Addition
18. NAME		18. NAME	☐ Change ☐ Addition
19. NAME		19. NAME	☐ Change ☐ Addition
20. NAME		20. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.05(2)(b), Florida Statutes. I further certify that the information provided with this filing is true and correct and that any signature shall have the same legal effect as if made under oath. I am familiar with and accept the obligations of Section 607.150(5), Florida Statutes. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.150(5), Florida Statutes.

SIGNATURE: Derek Boos DEREK BOOS 05/27/95 - 305-597-4025
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR