2002 UNIFORM BUSINESS REPORT (UBR)

May 24, 2002 8:00 am & Secretary of State DOCUMENT # P93000029296 1. Entity Name 05-24-2002 91359 001 ***150.00 GLOBAL MARKETING SYSTEMS CORP. 05-24-2002 91359 002 ***400.00 Principal Place of Business Mailing Address 216 20TH AVENUE NORTHEAST 216 20TH AVENUE NORTHEAST ST. PETERSBURG FL 33704 ST. PETERSBURG FL 33704 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3180976 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SWEENEY, SUSAN E Street Address (P.O. Box Number is Not Acceptable) 216 20TH AVENUE NORTHEAST ST. PETERSBURG FL 33704 City 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. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE □ Delete TITLE ☐ Change ☐ Addition CR2E034 (9/01) NAME SWEENEY, SUSAN E NAME STREET ADDRESS 216 20TH AVENUE NORTHEAST STREET ADDRESS CITY-ST-7IP ST. PETERSBURG FL 33704 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME SWEENEY, EDWARD A NAME STREET ADDRESS 216 20TH AVENUE NORTHEAST STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33704 CITY ST-ZIP? TITLE Delete TITLE Change ☐ Addition NAME MARTIN, JULIE NAME STREET ADDRESS 228 20TH AVENUE NORTHEAST STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33704 CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like

CITY-ST-ZIP

SIGNATURE:

FILED