

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000067180

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: GLOBAL FUNDS MANAGEMENT, INC.

## Current Principal Place of Business:

505 W OAK ST  
SUITE 101  
KISSIMMEE, FL 34741 US

## New Principal Place of Business:

308 W. BASS ST  
KISSIMMEE, FL 34741 US

## Current Mailing Address:

505 W OAK ST  
101  
KISSIMMEE, FL 34741 US

## New Mailing Address:

308 W BASS ST  
KISSIMMEE, FL 34741 US

FEI Number: 59-3198269

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARVELO, GUSTAVO  
505 W OAK ST  
SUITE 101  
KISSIMMEE, FL 34741 US

## Name and Address of New Registered Agent:

ARVELO, GUSTAVO  
308 W BASS ST  
KISSIMMEE, FL 34741 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:

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: MD ( ) Delete  
Name: ARVELO, GUSTAVO  
Address: 505 W OAK ST, SUITE 101  
City-St-Zip: KISSIMMEE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change ( ) Addition  
Name: ARVELO, GUSTAVO  
Address: 308 W BASS ST  
City-St-Zip: KISSIMMEE, FL

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: GUSTAVO ARVELO, MD

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date