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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Murtham Secretary of State DIVISION OF COURSESATIONS

1006

	1330	0.4131014.0	CORPORATION	DN2				
DOCUMENT # P94000081260 (9) 1. Corporation Name								
GLOB	AL PARAPHERNALIA, INC	•						
					I I BANADA NIO PORNI DANG BANADA	ili as ili sa if	A ABAN JANA A	1 818 1 011 1 30 1
D	10							
Principal Place of Business		Mailing Address			A INCLUSED HER SERVE BERTE SENTE)))	1 16101 11010 11	
8260 N W 27TH ST STE 410		3260 S.W. 130 AVE. MIAMI FL 33175						
MIAMI FL 33122		MINMI IE 331/3						
US				3. Date Incorporated or Qualified 11/03/1994		nte of Last F		
2. Principal Place of Business		2a. Maing Address				Applied For		
21		26		65.0500477		Not Applicable		
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional
City & State		City & State					Fee	Required
23		28			6. Election Campaign Financing Trust Fund Contribution			00 May Be
Zip Country		Z/p	Country		8. This corporation has liability for	iutanoible		ed to Fees
24	25	29	30			. □ No	tex cirioes a	133.002
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New F	legistered	d Agent	
MEDINE	IN MECTAR I		81	Name				İ
MERUELO, HECTOR J 3260 S.W. 130 AVE.			82	Street Addi	ress (P.O. Box Number is Not Acceptat	olie)		
	EL 33175		83					
			الما					
			84	City		FI		ip Code
 Pursuant to or registere 	the provisions of Sections 607.050 agent, or both, in the State of Flo	02 and 607.1508, Florida Statut nida, Such change was authori	tes, the above-r	named corpor	ration submits this statement for the pur rd of directors. I horeby accept the app	rpose of c	nanging its	registered office
familiär with	n, and accept the obligations of, Sec	ction 607.0505, Florida Statute	5	oranier i s bodi	rd or directors. Thoretry accept the app	onument a	.s registered	u agent. i am
SIGNATURE _	Signature: typed or printed han is of registerish age	r Land the Faurin about	ÜL Beyeleria Ağer	Let worth serve a some				
12.	OFFICERS AI	ND DIRECTORS	13.	e asgrate or re-response	ADDITIONS/CHANGES TO OFF	ICERS AN	ID DIRECTO	OBS IN 12
TITLE	P	☐ DELETE	1 1 7 77 F				☐ Change	☐ Addition
NAME	MERUELO, HECTOR J		1.2 NAME					
STREET ADDRESS	3260 S W 130TH AVE MIAMI FL		13 STREET					
CITY-ST-ZIP TITLE	VP VP	☐ DELETE	140114-8	I - 21F				
NAME	MERUELO, MARIA J	[] beech	2 1 HILE 2 2 NAME				☐ Change	☐ Addition
STREET ADDRESS			2.3 STREET ADORESS					
CITY-ST-ZIP	MIAM! FL		2.4 CITY - S					
TITLE	T	T DELETE					Change	Addition
NAME	MERUELO, HECTOR J		3.2 NAMÉ					
STREET ADDRESS	3260 S W 130TH AVE		33 STREET	ADDRESS				
CITY-ST-ZIP TITLE	MIAMI FL S	DELETE	3.4 CIFY - S	- ZIP				
NAME	MERUELO, MARIA J	☐ beccie	4 1 11 LE 4 2 NAME				Change	Addition
STREET ADORESS	3260 S W 130TH AVE		4.3 STREE1	Anneses:				
CHTY - S1 - ZIP	MIAMI FL		4.4 CHY - S					
TITLE		☐ DELETE	5 1 Tille!				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5 4 CITY - SI	I - ZIF				<u>-</u>
NAME		□ office	6 1 TIFLE				Change	Addition
STREET ADDRESS			6.3 STREET.	4' ORESC				
CITY - ST - ZIP			6.4 CITY - ST					
14 Ldo hereby	cortify treat the information a sent of	London to the Miller of the Control of						

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated β : this animal report or supplemental animal 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 directory in the corporation or the recover or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Date