

ANNUAL REPORT

FILED
May 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000086874

1. Entity Name
 GLOBAL FUNDING ASSOCIATES, INC.



Principal Place of Business
 20533 BISCAYNE BLVD
 PMB #4218
 AVENTURA, FL 33180-1529 US

Mailing Address
 20533 BISCAYNE BLVD
 PMB #4218
 AVENTURA, FL 33180-1529 US



05252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0537094	Applied For Not Applicable
5. Certificate of Status Desired	☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVINE, RANDY
 20533 BISCAYNE BLVD #4218
 #232
 AVENTURA, FL 33180

**DO NOT WRITE
 IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
 Due by September 6, 2006**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
 corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	LEVINE, RANDY
STREET ADDRESS	20533 BISCAYNE BLVD #4218
CITY-ST-ZIP	AVENTURA, FL 33180

TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

000000566337
 05/31/06-80001-007 158.75

**DO NOT WRITE
 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Randy Levine, Inc. **RANDY LEVINE**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-25-06
 Date

305 931-8616
 Daytime Phone #