DOCUMENT # P95000049413  1. Entity Name GLOBAL RECRUITING, INC.					Apr 17, 2001 8:00 am Secretary of State 04-17-2001 90050 031 ***150.00				
Principal Place of Business 1500 NW 62 ST SUITE 406 FT LAUDERDALE FL 33309 US		Mailing Address 1500 NW 62 ST SUITE 406 FT LAUDERDALE FL 33309 US				4216	-	<b>3.5</b> 1421 1 <b>42</b> 1	
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. 1	El Number <b>65-059181</b> 0	3		plied For at Applicable	
Žip	Country	Zip	Country	5. (	Certificate of Status Desired		8.75 Add ee Required		
	6. Name and Address of Current R	egistered Agent	Name	7. 1	Name and Address of New F	legistered A	jent		
CHEROF, JAMES A 3099 EAST COMMERCIAL BOULEVARD STE 200			Street Address	Street Address (P.O. Box Number is Not Acceptable)					
FOR	FLAUDERDALE FL 33308								
	·		City			FL	Zip Code	€	
Tax filing (See crite)	oration is eligible to satisfy its Intangible requirement and elects to do so.	After MAY 1, 2001 Make Check Payable		tate	Election Campaign Fir Trust Fund Contribution  DITIONS/CHANGES TO OFF	ın. 🗆	Added	O May Be to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D  GINSBERG, RUSSELL  1853 N.W. 111TH AVENUE  PLANTATION FL 33322	Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	AL	DITIONS/CHANGES TO OFF		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAHN, WARREN S 1390 SOUTH OCEAN BLVD. #3A POMPANO BEACH FL 33062	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIEBERMAN, RONALD 6162 NW 41ST DR CORAL SPRINGS FL 33067	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
indicated of the cor	certify that the information supplied with t on this report or supplemental report is t poration or the receiver or trustee empoy or on an attachment with an address	rue and accurate and that my s vered to execute this report as	e exemption stated in signature shall have the required by Chapter 6	Section e same 07, Flori	119.07(3)(i), Florida Statutes. legal effect as if made under da Statutes; and that my nam	I further certii oath; that I ar e appears in	y that the in n an officer Block 11 or	formation or director Block 12 if	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

101 954-473-5539