


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P95000090313	
1. Entity Name Global World-Wide Bankers Trust Corp.	

FILED
03 OCT 17 PM 12:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400024241704
10/29/03--01012--019 **1200.00
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2. Principal Place of Business 3001 Ponce de Leon Blvd.		3. Mailing Address Same	
Suite, Apt. #, etc. Suite 101		Suite, Apt. #, etc. Same	
City & State Coral Gables, Florida		City & State Same	
Zip 33134	Country USA	Zip Same	Country Same

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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7. Name and Address of Current Registered Agent	
Name Yishai Haydelstien	
Street Address (P.O. Box Number is Not Acceptable) 3001 Ponce de Leon Blvd., Suite 101	
City Coral Gables	FL Zip Code 33134

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 *Yishai Haydelstien* DATE 10/8/03
Sign, or typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Agustin Barres-Fanjul 3001 Ponce de Leon Blvd., #101	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/S Yishai Haydelstien 3001 Ponce de Leon Blvd., #101	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Herman V Gutierrez 3001 Ponce de Leon Blvd., #101	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/VS Jesus H Amado 3001 Ponce de Leon Blvd., #101	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Yishai Haydelstien* DATE 10/8/03 (305) 476-0777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)