

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 22, 1999 8:00 am  
Secretary of State

04-22-1999 90138 020 \*\*\*150.00

DOCUMENT # P96000013385

1. Corporation Name

GLOBAL TRANSFER CORP.

Principal Place of Business

8024 NW 68 STREET  
MIAMI FL 33166  
US

Mailing Address

8024 NW 68 STREET  
MIAMI FL 33166  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 7272 NW 33 Street  
Suite, Apt. #, etc.

2a. Mailing Address

26 7272 NW 33 Street  
Suite, Apt. #, etc.

22

27

City & State

23 Miami, FL

City & State

28 Miami, FL

Zip

Country

24 33122

25 USA

Zip

Country

29 33122

30 USA

3. Date Incorporated or Qualified

02/13/1996

4. FEI Number

65-0640477

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

RODRIGUEZ, VICTOR M  
8024 NW 68 STREET  
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

Roger Silverio

82 Street Address (P.O. Box Number is Not Acceptable)

7272 NW 33 Street

83

84 City

Miami

FL

85 Zip Code

33122

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Rodriguez, Victor M

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

P

RODRIGUEZ, VICTOR  
150 MORNINGSIDE DR  
MIAMI SPRINGS FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

V

SILVERIO, ROGER  
5961 SW 44TH TERRACE  
MIAMI FL 33155

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

P  
Silverio, Roger  
5961 SW 44 Terr.  
Miami, FL 33155

☒ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rodriguez, Victor M

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/99 305 470 1901

Date

Daytime Phone #