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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 17 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000077921 (0)

GLOBAL STRATEGIC COMMUNICATIONS INC.

17403 NW 48TH PL. MIAMI FL		17403 NW 48TH PL Miami Fl 33055-3613			
ł					Date Incorporated or Qualified     3a. Date of Last Report     09/19/1996
2. Principal Pl	ace of Business	2a, Mailing Address		····	4. FEI Number Applied For
21		26			65-069 7577 Not Applicable
Suite, Apt.	#. elc	Suite, Apt. #, etc.	·	***	SR 75 Additional
22 City & State		City & State		<del></del>	5. Certificate of Status Desired
	,	<b>├</b> ¬¬ ′			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
<b>23</b> Zip	Country	<b>28</b>	Country	,	
	}	——————————————————————————————————————	~ ´		This corporation has liability for intangible tax under s. 199.032,     Florida Statutes
24	25 g. Name and Address of Current	29 3	<u>01</u>	<del></del>	10. Name and Address of New Registered Agent
140		Trogratorou Agont	81	Name	(b), Halife and Address of New Hogestee Agent
	ARGADA, MARIANO A				
	3 NW 48TH PL.		82	Street /	Address (P.O. Box Number is Not Acceptable)
MIAN	AI FL		83	+	
			-	<u> </u>	[av. ] 7- O-10
			64	City	FL 85 Zip Code
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					
Signature, typed or pricted name of registered agent and title it approache. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1 1 TITLE		Change Addition
NAME	LAPARGADA, MARIANO A		1.2 NAME		
STREET ADDRESS	17403 NW 48TH PL.		1.3 STREET	ADDRESS	
CITY-ST-ZIF	MIAMI FL	·····	1.4 CITY-	ST-, ZIP	
TITLE	DV	☐ DELETE	2.1 TITLE	·	Change Addition
NAME	LAPARGADA, VICTOR M		2.2 NAME		·
STREET ADORESS	17403 NW 48TH PL.		2.3 STREE	[ ADDRESS	3
CITY-S1-ZIP	MIAMI FL		2. 4 CITY -	ST-ZIP	
TITLE	DS	DELETE	3.1 TITLE		Change : Addition
NAME	Lapargada, dora f		3.2 NAME		
STREET ADDRESS	17403 NW 48TH PL.		3.3 STREE	T ADDRESS	
CHY-ST-ZIP	MIAMI FL		3.4. CITY -	ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	·	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	T ADDRESS	
CITY-ST-ZIP			4.4 CITY-:	ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	,	☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	T ADDRESS	
CITY - ST - ZIP			5.4 CITY-	\$1-ZIP	
TITLE		DELETE	6.1 TITLE	.,	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREE	T ADDRESS	
CITY - ST - ZIP			6.4 CITY-		
14. I do 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 a raddress.					