

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90046 041 ***150.00

DOCUMENT # P96000099583

1. Entity Name
GLOBAL EXCHANGE GROUP, INC.



Principal Place of Business
8572 LANSMERE LANE
ORLANDO FL 32835

Mailing Address
8572 LANSMERE LANE
ORLANDO FL 32835

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3425913

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

SHEIBANI, AMIR P
8572 LANSMERE LANE
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name SHEIBANI, AMIR P.
Street Address (P.O. Box Number is Not Acceptable) 8572 LANSMERE LANE
City ORLANDO FL Zip Code 32835

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CEO
NAME SHABANY, AMIR K
STREET ADDRESS 58 W 58 STREET STE 19 D
CITY-ST-ZIP NEW YORK NY 10019

TITLE CEO
NAME SHEIBANY, AMIR K.
STREET ADDRESS 8572 LANSMERE LANE,
CITY-ST-ZIP ORLANDO, FL 32835

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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 Block 11 if changed, or on an attachment with an address, with an officer or director.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

30 JAN 2003 407
Date Daytime Phone # 7584344

CR2E034 (10/02)