

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000008809	
1. Entity Name GLOBAL HANDBAGS COLLECTION, INC.	

Principal Place of Business 18741 WEST DIXIE HIGHWAY NORTH MIAMI, FL 33180	Mailing Address 18741 WEST DIXIE HIGHWAY NORTH MIAMI, FL 33180
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03112006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0719919	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SEMET, BARRY N 100 SOUTHEAST 2ND STREET 17TH FLOOR MIAMI, FL 33131
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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 <u>x</u> <u>Salomon Zebede</u> Signature, typed or printed name of registered agent and title if applicable	DATE <u>x</u> <u>3-31-06</u> (NOTE: Registered Agent signature required when reappointing)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	0 ZEBEDE, SALOMON 18741 WEST DIXIE HIGHWAY NORTH MIAMI, FL 33180
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 all other like empowered.	
SIGNATURE: <u>Salomon Zebede</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE <u>3-31-06</u> Daytime Phone #