2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with

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SIGNATURE:

May 01, 2006 8:00 am Secretary of State 05-01-2006 90456 022 ***150 00 DOCUMENT # P97000103631 1. Entity Name GLOBAL FINANCIAL ADVISORY, INC. Principal Place of Business Mailing Address 60031855 2080 RINGLING BLVD., SECOND FLOOR 2080 RINGLING BLVD., SECOND FLOOR SARASOTA, FL 34237 SARASOTA, FL 34237 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04262006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 65-0805924 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GARBADE, JOSEPH L 2080 RINGLING BLVD., SECOND FLOOR SARASOTA, FL 34237 SARASOTA 8. The above named entity submits this statement for the purpo office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Geoffrey Frazier 4-27-0L SIGNATURE Signature, typed or printed name of registered agent and title ign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS Addition TITLE ☐ Delete TITLE FRAZIER, GEOFFREY A NAME 2080 RINGLING BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA, FL 34237 Change TITLE DP Delete TITLE ☐ Addition ST. GEORGE, RICK NAME NAME 2080 RINGLING BLVD. STREET ADDRESS STREET ADDRESS SARASOTA, FL 34237 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition CEO ☐ Delete TITLE DIXON, MICHAEL J NAME NAME 2080 RINGLING BLVD. STREET ADDRESS STREET ADDRESS SARASOTA, FL 34237 CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE THILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 grature 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 empoweres to execute this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED

R Date Date Descriptions