

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000006400

FILED
Jan 14, 2002 8:00 AM
Secretary of State

Entity Name: GLOBAL HEALTH SYSTEMS, INC.

Current Principal Place of Business:

1935 SE 19 LANE
CAPE CORAL, FL 33904

New Principal Place of Business:

1935 SE 19TH LANE
CAPE CORAL, FL 33990

Current Mailing Address:

2323 DEL PRADO BLVD.
SUITE 7
CAPE CORAL, FL 33990

New Mailing Address:

2323 DEL PRADO BLVD.
SUITE 245
CAPE CORAL, FL 33990

FEI Number: 65-1816230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZITZKE, MARILYN
1935 SE 19 LN
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

ZITZKE, MARILYN
1935 SE 19 LN
CAPE CORAL, FL 33990 US

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.

SIGNATURE:

01/14/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ZITZKE, MARILYN
Address: 1935 SE 19 LANE
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARILYN ZITZKE

MS.

01/14/2002

Electronic Signature of Signing Officer or Director

Date