

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 24, 2002 8:00 am**  
**Secretary of State**

07-24-2002 90189 041 \*\*\*158.75

971008

DOCUMENT # **990 P 98 000040716**

1. Entity Name

**Global Software Specialists, Inc**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**888 Blvd of the Arts**

Suite, Apt. #, etc.

**#503**

3. Mailing Address

**888 Blvd of the Arts**

Suite, Apt. #, etc.

**#503**

City & State

**Sarasota, FL**

City & State

**Sarasota, FL**

4. FEI Number

**59-3507696**

Applied For

Not Applicable

Zip

**34236**

Country

**USA**

Zip

**34236**

Country

**USA**

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**Steven McKenney**

Street Address (P.O. Box Number is Not Acceptable)

**888 Blvd of the Arts #503**

City

**Sarasota**

FL

Zip Code

**34236**

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**7/15/02**

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

|  |   |  |                                       |
|--|---|--|---------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>President<br/>Steven McKenney<br/>888 Blvd of the Arts #503<br/>Sarasota, FL 34236</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Director<br/>Steven McKenney<br/>888 Blvd of the Arts #503<br/>Sarasota, FL 34236</b>  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DO NOT WRITE<br/>IN THIS SPACE</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DO NOT WRITE<br/>IN THIS SPACE</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                       |

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment #  
PA8000040716  
971008

To Whom It May Concern:

My Corporation had a change of address last year (I moved). The UBR was subsequently returned to your office - ~~it was not forwarded to my~~ new address. I contacted your office via phone. They notified me that a UBR would be sent to my new address and that an address change would be filed with the new UBR. They also stated that the fee is \$150.00 since the UBR was returned to your office.

Thank you,

Steven McKenny