

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**May 05, 1999 8:00 am**  
**Secretary of State**

05-05-1999 90210 046 \*\*\*158.75

U103226

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **P98000098187**

1. Corporation Name  
**GLOBAL SOLUTIONS INTL INC**



Principal Place of Business Mailing Address  
**9421 S. ORANGE BLOSSOM TR., STE. 20C** **9421 S. ORANGE BLOSSOM TR., STE. 20C**  
**ORLANDO FL 32837** **ORLANDO FL 32837**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**11/23/1998**

4. FEI Number  
**59-3544631** Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business 2a. Mailing Address  
**21** Suite, Apt. #, etc. **26** **15501 BRUCE B DOWNS**

**22** City & State **27** Suite # **4317**

**23** City & State **28** **TAMPA, FL**

**24** Zip **25** Country **29** Zip **30** Country  
**33647** **USA**

9. Name and Address of Current Registered Agent  
**SARIPUDI, SRINIVASARAO**  
**2416 BARLEY CLUB CT., APT. #2**  
**ORLANDO FL 32837**

10. Name and Address of New Registered Agent  
**81** Name **UMAKANTH VEMURI**  
**82** Street Address (P.O. Box Number is Not Acceptable)  
**15501 BRUCE B DOWNS**  
**83** Suite # **4317**  
**84** City **TAMPA** **FL** **85** Zip Code **33647**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *X Vemuri Umakanth* DATE **X 04/21/99**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
REGISTERED AGENT	SARIPUDI, SRINIVASARAO	2416 Barley Club Ct, Apt #2	ORLANDO, FL 32837	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PRESIDENT	UMAKANTH VEMURI	15501 BRUCE B DOWNS, suite 4317	TAMPA, FL 33647	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X S. Saripudi* DATE: **X 04/23/99** DAYTIME PHONE: **813-495-0461**

CR2E034 (11/98)