

2001 UNIFORM BUSINESS REPORT (UBR)

PS 192

APPROVED
AND
FILED

01 AUG 27 PM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

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DOCUMENT # P99000005883

1. Entity Name

GLOBAL FINANCIAL SERVICES OF SOUTH FLORIDA, INC.

Principal Place of Business

1655 EASTLAKE WAY
WESTON FL 33326

Mailing Address

1655 EASTLAKE WAY
WESTON FL 33326

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0886072

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, WILLIAM T
1655 EASTLAKE WAY
WESTON FL 33326

Name

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

City

FL

Zip Code

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)

DATE

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

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
P SMITH, WILLIAM T 1655 EASTLAKE WAY WESTON FL 33326	
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600004586426-5
-09/13/01-01010-008
*****150.00 *****150.00

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
Signature of William T. Smith

Date

8-14-07

Daytime Phone #

CR2E034 (5/01)

85 282

Doc# 999000005883

August 14, 2001

Katherine Harris
Secretary of State
Florida Department of State
Division of Corporations
Tallahassee, Florida

Dear Sirs:

I have enclosed the 2001 UNIFORM BUSINESS REPORT along with my check for \$150.

I realize the payment is late but ask your understanding. My wife, who takes care of our books and records contracted breast cancer. I thought she had been up on the administrative duties such as this filing, but came across the report when I was going through our files. Apparently the therapy affected her normal organizational skills.

She is much better now, but does not remember forgetting to make this filing and payment. We do apologize and ask you understanding and waiver of the penalty for late filing.

Very truly yours,



William T. Smith
President
Globil Financial Services # 65-0886072