2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000015192

1. Entity Name

GLOBAL ORGANIC/SPECIALTY SOURCE, INC.



Principal Place of Business

7345 16TH ST. E

/343 1010 31. #116

SARASOTA, FL 34243-6806 US

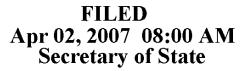
Mailing Address

7345 16TH ST. E

#116

DO NOT WRITE IN THIS SPACE

SARASOTA, FL 34243-6806 US





01162007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0893634 Applied For Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLUMENTHAL, MITCH 2604 MAN OF WAR CIRCLE SARASOTA, FL 34240

DO NOT WRITE IN THIS SPACE

				IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the p tions of registered agent.	urpose of changing its regis	stered office or re	egistered agent, or bot	h, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if	f applicable. (NOTE: Regi	stered Agent signature	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign F Trust Fund Contributi		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PT BLUMENTHAL, MITCH 2604 MAN OF WAR CIRCLE SARASOTA, FL 34240 VPS BLUMENTHAL, RICHARD				U00000688101	
STREET ADDRESS CITY-ST-ZIP TITLE	1908 BLVD OF THE ARTS SARASOTA, FL 34236		_		04/09/07-80032-009 158.75	
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE	
TITLE NAME						

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/2007

941 - 358-6535 Daylime Phone #