

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000100373

FILED
Jul 01, 2004
Secretary of State

Entity Name: GLOBAL PHARMA CENTER, INC.

Current Principal Place of Business:

301 CLEMATIS STREET
#3000
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

2201 49TH AVE
COCONUT CREEK, FL 33063

New Mailing Address:

FEI Number: 65-0963919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAME, JEAN LUC
8201 NW 70TH STREET
TAMARAC, FL 33321

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRAME, JEAN LUC
Address: 2201 NW 49TH AVE
City-St-Zip: COCONUT CREEK, FL 33063

Title: D () Delete
Name: GINET, MARYLINE
Address: 2201 NW 49TH AVE
City-St-Zip: COCONUT CREEK, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: BRAME JEAN LUC

D

07/01/2004

Electronic Signature of Signing Officer or Director

Date