

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S38885

FILED
Apr 12, 2009
Secretary of State

Entity Name: GLOBAL SPECIALTY TRADING CORPORATION

Current Principal Place of Business:

2770 NW 24TH ST
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

2770 NW 24TH ST
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-0253539

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOBIN, DAVID M.
4555 ADAMS AVENUE
MIAMI BEACH, FL 33140 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: DUENAS, ROBERTO M.
Address: 2770 NW 24TH ST.
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: DOBIN, DAVID M
Address: 4555 ADAMS AVE
City-St-Zip: MIAMI BCH, FL

Title: AS (X) Delete
Name: DUENAS, ALBERTO
Address: 2770 NW 24TH ST.
City-St-Zip: MIAMI, FL

Title: PD () Delete
Name: WALSKY, ROBERT P
Address: 2770 NW 24TH STREET
City-St-Zip: MIAMI, FL

Title: DVP () Delete
Name: DUENAS, ALBERTO AS
Address: 2770 NW 24TH STREET
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C/D (X) Change () Addition
Name: DUENAS, ROBERTO M.
Address: 2770 NW 24TH ST.
City-St-Zip: MIAMI, FL 33142 US

Title: S/D (X) Change () Addition
Name: DOBIN, DAVID M
Address: 4555 ADAMS AVE
City-St-Zip: MIAMI BCH, FL 33142 US

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

Title: P/D (X) Change () Addition
Name: WALSKY, ROBERT P
Address: 2770 NW 24TH STREET
City-St-Zip: MIAMI, FL 33142 US

Title: VP (X) Change () Addition
Name: DUENAS, ALBERTO
Address: 2770 NW 24TH STREET
City-St-Zip: MIAMI, FL 33142 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAVID M DOBIN

S/D

04/12/2009

Electronic Signature of Signing Officer or Director

Date