

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90028 019 ***150.00

DOCUMENT # *S 66580*
1. Entity Name
Global Metals Corp.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
516 NW 61 Ave
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 350291
Suite, Apt. #, etc.
MIAMI

DO NOT WRITE IN THIS SPACE

City & State
MIAMI FL

City & State
FL

Zip
33126

Country
MIAMI DARE

Zip
33135

Country
MIAMI DARE

4. FEI Number
650272282

Applied For
 Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ANGEL A. SUAREZ

Street Address (P.O. Box Number is Not Acceptable)
516 NW 61 Avenue

City
MIAMI **FL** Zip Code
33126

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 _____ (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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>DPC Angel A. Suarez 516 NW 61 Avenue MIAMI FL 33126</i>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>DST Fidelina Suarez 516 NW 61 Avenue MIAMI FL 33126</i>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Angel A. Suarez* **ANGEL A SUAREZ PRESIDENT** *4/21/02*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

305-262-1118

CR2E034B (12/01)