

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000001483

**Entity Name:** GENERAL CORPORATE SERVICES, INC.

**Current Principal Place of Business:**

4699 N. FEDERAL HWY  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

23638 LYONS AVENUE #223  
NEWHALL, CA 91321 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REGISTERED AGENTS INC.  
3030 N. ROCKY POINT DR., STE.150A  
TAMPA, FL 33607 US

*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

**Officer/Director Detail :**

Title CHAIRMAN  
Name GLASS, JEFFREY  
Address 199 EAST FLAGLER STREET #510  
City-State-Zip: MIAMI FL 33131

Title PRESIDENT  
Name GLASS, JEFFREY  
Address 199 EAST FLAGLER STREET #510  
City-State-Zip: MIAMI FL 33131

Title VC  
Name GLASS, JEFFREY  
Address 199 EAST FLAGLER STREET #510  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR  
Name GLASS, JEFFREY  
Address 199 EAST FLAGLER STREET #510  
City-State-Zip: MIAMI FL 33131

Title VP  
Name GLASS, JEFFREY  
Address 199 EAST FLAGLER STREET #510  
City-State-Zip: MIAMI FL 33131

Title SECRETARY  
Name GLASS, JEFFREY  
Address 199 EAST FLAGLER STREET #510  
City-State-Zip: MIAMI FL 33131

Title TREASURER  
Name GLASS, JEFFREY  
Address 199 EAST FLAGLER STREET #510  
City-State-Zip: MIAMI FL 33131

*I hereby 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 all other like empowered.*

**SIGNATURE:** JEFFREY GLASS (POA)

**PRESIDENT**

**01/07/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date