

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 842932

1. Entity Name
GLOBE COMMUNICATIONS CORP.

FILED
Aug 03, 2000 8:00 am
Secretary of State

08-03-2000 90035 011 ***550.00

Principal Place of Business
5401 NW BROKEN SOUND BLVD.
BOCA RATON FL 33487-3512

Mailing Address
5401 NW BROKEN SOUND BLVD.
BOCA RATON FL 33487-3512



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 36-2702593

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(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) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00.
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V
NAME ROSENBLUM, MIKE
STREET ADDRESS 1350 SHERBROOKE ST., W.
CITY-ST-ZIP MONTREAL, QUEBEC, CANADA ☒ Delete

TITLE P, C
NAME David Pecker
STREET ADDRESS 5401 N.W. Broken Sound Blvd
CITY-ST-ZIP Boca Raton FL ☐ Change ☒ Addition

TITLE V
NAME KAHANE, MICHAEL
STREET ADDRESS 5401 N.W. BROKEN SOUND BLVD.
CITY-ST-ZIP BOCA RATON FL ☒ Delete

TITLE V, D
NAME John Miley
STREET ADDRESS 5401 N.W. Broken Sound Blvd
CITY-ST-ZIP Boca Raton FL ☐ Change ☒ Addition

TITLE VD
NAME ROSENBLUM, BARRY
STREET ADDRESS 3 EAST 54TH STREET 15TH FLOOR
CITY-ST-ZIP NEW YORK NY ☒ Delete

TITLE VD
NAME Scott Price
STREET ADDRESS 5401 N.W. Broken Sound Blvd
CITY-ST-ZIP Boca Raton FL ☐ Change ☒ Addition

TITLE TASD
NAME HOFFMAN, MORTON
STREET ADDRESS 1350 SHERBROOKE ST., W.
CITY-ST-ZIP MONTREAL, QUEBEC, CANADA ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME ROSENBLUM, RICHARD
STREET ADDRESS 1350 SHERBROOKE ST. W.
CITY-ST-ZIP MONTREAL, QUEBEC ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature Required Scott Price

7/25/00

561-540-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)