FILED

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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **H49938**

1. Corporation Name

GLOBAL REALTY ADVISORS, INC.

Principal Place of Business Mailing Address							(188181) 8111 81818 18118 (8186 1131 1811 816			
2401 PGA BLVC).	2401 PGA BLVD.								
STE. 272 STE. 272			1 04DDENG EL 20440				DO NOT WRITE IN THIS SPACE			
PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL US			FL 3341U	33410			3. Date Incorporated or Qualifed			
US		03					03/28/1985			
2. Principal Pl	ace of Business	2a. Mailing Address			-	4, FEI Number		plied For		
21		26				59-2768376		t Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	e	City & State				6. Election Campaign Financing	\$5.00	May Be		
23		28				Trust Fund Contribution	Added to	o Fees		
Zip	Country	Zip	Zip Country				8. This corporation owes the current year Intangible			
24	25	29	30				Personal Property Tax.		□No	
	9. Name and Address of Current	Registered Agent		Ь,			10. Name and Address of New Registere	d Agent		
0114	NIDO DODERT LEE			81	Name		•		}	
	PIRO, ROBERT LEE	•		82	Street	Addres	ss (P.O. Box Number is Not Acceptable)			
	PGA BLVD.									
STE.				83					i	
PAL	M BEACH GARDENS FL 33410			84	City			. 85 Zip C		
				04	City		· F			
office or re agent. I as SIGNATURE	egistered agent, or both, in the State o m familiar with, and accept the obligation Signature, typed or printed name of registered agent	f Florida. Such change was ons of, Section 607.0505, Fl	authorized lorida Stat	d by utes	the corpo	oration [*]	ation submits this statement for the purpose is board of directors. I hereby accept the appurpose when reinstating) DATE	ointment as rec	jistered	
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
TITLE	PST DELETE			1.1 TITLE				☐ Change	☐ Addition	
NAME	ROETS, JAMES C.		1.2 N	AME					1	
STREET ADDRESS	8668 SE OLEANDER STREET		1.3 S	TREET	ADDRESS				}	
CITY-ST-ZIP	HOBE SOUND FL		1.4 C	TY-S	Γ-ZIP					
TITLE				TLE				Change	☐ Addition	
NAME	II		2.2 N	2.2 NAME		}				
STREET ADDRESS	2401 PGA BLVD., STE. 272		2.3 \$	TREET	ADDRESS		•		1	
CITY-ST-ZIP	PALM BEACH GARDENS FL		- 1		T-ZIP				}	
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STREET ADDRESS			3.3 \$	TREET	ADDRESS					
CITY-ST-ZIP			3.4. 0	ITY-S	T-ZIP	ļ				
τητε		☐ DELETE	4.1 7	TLE				Change	☐ Addition	
NAME			4.2 N	IAME			•			
STREET ADDRESS			4.3 S	TREE	ADDRESS					
CITY-ST-ZIP				ITY-S	T- ZIP					
TITLE		☐ DELETE	51 T					Change	☐ Addition	
NAME			5.2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				TY-S	T-ZiP	↓			- 12.490	
TITLE		DELETE	6.1 T					☐ Change	Addition	
NAME			6.2 N	AME						
CTDEET ADDDESC			6.3 S	TREE"	TADDRESS	1		•		

14. 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 annual report or supplemental annual 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 12 or Block 13 if chapted, or on an attachment with all address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-691-0059

Daytime Phone #