## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K27582

FILED Mar 23, 2005 Secretary of State

Entity Name: INTERNATIONAL GLOBAL METALS INC.

Current F	Principal Plac	ce of Business:	New Principal Place	e of Business:
C/O SANI 1701 NW	DY LEIBOV 31ST AVE ERDALE, FL		•	
Current N	/lailing Addr	ess:	New Mailing Addre	ss:
1701 NW	DY LEIBOV 31ST AVE ERDALE, FL	33311		
FEI Numbei	r: 65-0066049	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
TAMARA( The above	CK OLIVE W. C, FL 33321 e named entition of Florida.	US	ourpose of changing its register	ed office or registered agent, or both,
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SIGNATU	RE:	onia Signatura of Dagistarad Ag	ont	Data
SIGNATU	RE: Electro	onic Signature of Registered Age	ent	Date
SIGNATU	RE:Electro	ing Trust Fund Contribution ( ).		
SIGNATU	RE: Electro	ing Trust Fund Contribution ( ).		Date  BES TO OFFICERS AND DIRECTO
SIGNATU	RE: Electronic Electro	ing Trust Fund Contribution ( ).  CTORS:  ( ) Delete RNARD OLIVE WAY		
SIGNATU  Election Ca  OFFICER  Title:  Name:  Address:	Electronic	ing Trust Fund Contribution ( ).  CTORS: ( ) Delete RNARD OLIVE WAY L ( ) Delete IDY OLIVE WAY	ADDITIONS/CHANC Title: Name: Address:	GES TO OFFICERS AND DIRECTO
Election Ca  OFFICER  Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic	ing Trust Fund Contribution ( ).  CTORS: ( ) Delete RNARD OLIVE WAY L ( ) Delete IDY OLIVE WAY L ( ) Delete VARD	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	GES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BERNARD M. LEIBOV PRES 03/23/2005