

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90119 041 ***155.00

DOCUMENT # P02000126149

1. Entity Name
ZOOMGLOBAL, CORP.



Principal Place of Business
1122 WEST JACKSON ST.
ORLANDO FL 32805

Mailing Address
1122 WEST JACKSON ST.
ORLANDO FL 32805

40000010



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

05-0555101

Applied For

Not Applicable

CHECK HERE IF MAKING CHANGES

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

MCINTYRE, ORESTES
1122 WEST JACKSON ST.
ORLANDO FL 32805

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME MCINTYRE, ORESTES
STREET ADDRESS 1122 WEST JACKSON ST.
CITY-ST-ZIP ORLANDO FL 32805 Delete

TITLE Bo GONG V - Chief Dev-OP
NAME 1122 W. JACKSON ST
STREET ADDRESS Orlando Florida 32855
CITY-ST-ZIP Change Addition

TITLE VD
NAME SKUNDA, DALE
STREET ADDRESS 1812 DELEWARE AVE.
CITY-ST-ZIP ST. CLOUD FL 34769 Delete

TITLE ED RENTAS V. Chief Rehrtech
NAME 1122 W JACKSON ST
STREET ADDRESS Orlando Florida 32855
CITY-ST-ZIP Change Addition

TITLE VD
NAME BOOKER, VINCENT
STREET ADDRESS 14139 COLONIAL GRAND BLVD., #1504
CITY-ST-ZIP ORLANDO FL Delete

Change Addition

TITLE VD
NAME VASQUEZ, GILBERT
STREET ADDRESS 4232 SAWYER CIR.
CITY-ST-ZIP ST. CLOUD FL 34772 Delete

Change Addition

TITLE VD
NAME GIL, PEDRO
STREET ADDRESS 12111 CUBED CT.
CITY-ST-ZIP ORLANDO FL 32837 Delete

Change Addition

TITLE Delete

Change Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Orestes McIntyre*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-28-03-407-497-6045
Date Daytime Phone #

CR2E034 (10/02)