

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
FILED pg. 1 of 2

APPLICATION
FOR 97-98



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

98 MAR 16 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000004045

1. Corporation Name

Global Training Services

97-98 AR

Principal Place of Business

Mailing Address

15495 Eagle Nest Lane #130
Miami Lakes, FL 33014

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

1-16-96

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0632581

Applied For

City & State

City & State

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D/P/SA	Cheryl Wachtel	15495 Eagle Nest Lane #130	Miami Lakes, FL 33014
VP	Samuel Wachtel	15495 Eagle Nest Lane #130	Miami Lakes, FL 33014

A. Alan
3/16/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Cheryl Wachtel
15495 Eagle Nest Ln #130
Miami Lakes, FL 33014

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc. 400002462834--5
City -03/20/98 State FL Code 007

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.007(1), F.S. \$15.00 ****\$315.00

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(j), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/98 (305)364-3240

Date

Daytime Phone #

CR2E040 (1/98)



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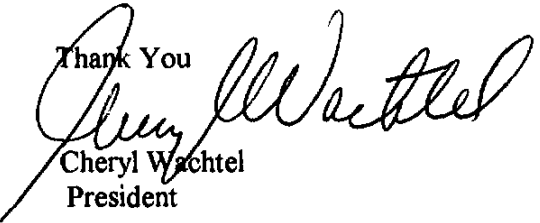
March 13, 1998

Florida Department of State
Division of Corporations P.O. Box 6327
Tallahassee, FL 32314

Enclosed please find our application for reinstatement and a check for \$315.00. This payment includes \$165.00 for 1997 and \$150.00 for 1998.

The reinstatement fee is being waived this one time because we moved and the renewal application was not forwarded to us. According to the person I spoke with at your office the renewal application and all other correspondence was returned to you.

Thank You


Cheryl Wachtel
President

Global Training Services, Inc.

15495 Eagle Nest Lane • Suite 130 • Miami Lakes • Florida 33014
Tel. (305) 364-3200 • Fax (305) 364-0085 • e-mail: globaltraining@juno.com