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 # P97000033317

1. Corporation Name

GLOBAL INFRASTRUCTURE CORP.

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90126 017 ***150.00



					30 114 50 141 06 441	i ((8)) (0)) (9)
Principal Place	e of Business	Mailing Address				
4932 SOUTHSHORE DR NEW PORT RICHEY FL 34652		4932 SOUTHSHORE DR NEW PORT RICHEY FL 34652				
- /**-				DO NOT WRITE IN TH	IS SPACE	
				3. Date Incorporated or Qualifed 04/14/1997		
2. Principal P	Place of Business	2a. Mailing Address	,,,	4. FEI Number	A	oplied For
21 2453	write Willow Was	26 3453 Whiteh	silve wa	59-34387 <u>35</u>	N	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	•	Additional equired
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00	May Be
23] Spoctu	1111 (1)	28 Spring Hill	FL	Trust Fund Contribution		to Fees
Zip	Country	zip		= 8 This corporation owes the current year	ntangible	<i>,</i> .
24 3460	06 25 USA	29 34606	0 052	Personal Property Tax.	Yes	Z/No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent	
1		<u> </u>	81 Name	met Walon Prosident		
	BER, MATT		82 Street	Address (P.O. Box Number, is Not Acceptable)		
	2 SOUTHSHORE DR		34			
NEW	V PORT RICHEY FL 34652		83			-
i					05 7:-	Codo
			84 City 2	Pociuma U/\\		Code 606
11 Purcuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the above-named	corporation submits this statement for the purpose	of changing its	registered
office or r	registered agent, or both, in the State o am familiar with, and accept the obligati	f Florida. Such change was aut	horized by the corpo	oration's board of directors. I hereby accept the app	ointment as re	egistered
SIGNATURE				DATE Daying when reinstating DATE		
	Signature, typed or printed name of registered agent		Registered Agent signature n	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
12.	OFFICERS AND	DELETE	-		Change	☐ Addition
TITLE	P	□ Dereië	1.1 TITLE	Meber, Mattlew 3453 white willow way		
NAME	WEBER, MATTHEW		1.2 NAME	mede /		
STREET ADDRESS	*		1.3 STREET ADDRESS	393 3 WARE SOLLING		
CITY-ST-ZIP	NEW PORT RICHEY FL 34652		1.4 CITY-ST-ZIP	Spring Hill, FL 34606	Change	Addition
TITLE	,	☐ DELETE	2.1 TITLE	. •	□ cuanãe	
NAME ,			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			F-1
TITLE		☐ DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
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CITY-ST-ZIP	1		3.4. CITY-ST-ZIP			·
_TITLE [DELETE	4.1·TITLE -		Change	☐ Addition
NAME	• .		4.2 NAME			
STREET ADDRESS	·		4.3 STREET ADDRESS			
	[4.4 CITY-ST-ZIP			
TITLE		• DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
	,}		5.3 STREET ADDRESS			
STREET ADDRESS	7		5.4 CITY-ST-ZIP			
CITY-ST-ZIP		☐ DELETE	6.1 TITLE			Addition
TITLE			6.2 NAME		90	
NAME		•	0.2 IVAME			
STREET ADDRESS	1 '		CO OTOCIT ADDOCCO			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	A STOWN First Control of the		In f

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

SIGNATURE: