

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000049068

1. Entity Name

GLOBEX MANAGEMENT, INC.

FILED
Mar 28, 2001 8:00 am
Secretary of State

03-28-2001 90219 043 ***150.00

0611571

Principal Place of Business
1239 E. NEWPORT CENTER DR.
SUITE 117
DEERFIELD BEACH FL 33442
US

Mailing Address
1239 E. NEWPORT CENTER DR.
SUITE 117
DEERFIELD BEACH FL 33442
US

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0839530**
Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WILLIAMS, DIANA
4902 N.W. 105TH DR.
CORAL SPRINGS FL 33076

7. Name and Address of New Registered Agent
Name Williams, Diana
Street Address (P.O. Box Number is Not Acceptable)
1239 E. NEWPORT CENTER Drive, suite 117
City Deerfield Beach FL Zip Code 33442

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.

N/A

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CFO	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	WILLIAMS, DIANA		NAME		
STREET ADDRESS	4902 N.W. 105TH DR.		STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33076		CITY-ST-ZIP		
TITLE	DT	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	WILLIAMS, DIANA		NAME		
STREET ADDRESS	4902 N.W. 105TH DR.		STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33076		CITY-ST-ZIP		
TITLE	DP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	WILLIAMS, NEIL		NAME		
STREET ADDRESS	4902 N.W. 105TH DR.		STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33076		CITY-ST-ZIP		
TITLE	DC	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	JADALI, NILOUFAR		NAME		
STREET ADDRESS	10733 RANCHIPUR ST.		STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33437		CITY-ST-ZIP		
TITLE	CEOS	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	KHATAMI, ALI		NAME		
STREET ADDRESS	10733 RANCHIPUR ST.		STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33437		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

NILOUFAR JADALI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/26/01
Date

954-571-9200
Daytime Phone #

CR2E034 (10/00)