

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Sep 12, 2001 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000055925**

1. Entity Name  
**CLARKE'S GLOBAL INVESTMENTS INTERNATIONAL, INC.**

Principal Place of Business 612 HIGHLAND AVENUE  DUNEDIN FL 34698	Mailing Address POST OFFICE BOX 489  DUNEDIN FL 34697
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2. Principal Place of Business  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State	City & State	4. FEI Number <b>59-3530133</b>	Applied For <input type="checkbox"/>
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

SPIEGLE & UTRERA, P.A.  
 343 ALMARIA AVE  
  
 CORAL GABLES FL 33134

**7. Name and Address of New Registered Agent**

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.

SIGNATURE \_\_\_\_\_ DATE **09/12/2001**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	
T NAME BROWN SHERELLE STREET ADDRESS 612 HIGHLAND AVENUE CITY-ST-ZIP DUNEDIN FL 34698	<input type="checkbox"/> Delete
S NAME DUNN VENICE STREET ADDRESS 612 HIGHLAND AVENUE CITY-ST-ZIP DUNEDIN FL 34698	<input type="checkbox"/> Delete
VD NAME DUNN QUINCY J STREET ADDRESS 612 HIGHLAND AVENUE CITY-ST-ZIP DUNEDIN FL 34698	<input type="checkbox"/> Delete
PD NAME CLARKE DONALD A STREET ADDRESS 612 HIGHLAND AVENUE CITY-ST-ZIP DUNEDIN FL 34698	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
T NAME FERGUSON ELVINA STREET ADDRESS 612 HIGHLAND AVENUE CITY-ST-ZIP DUNEDIN FL 34698	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:** Donald Clarke T Date **09/12/2001**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (11/00)