

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 371030

(8)

1. Corporation Name

GLOBAL ENTERPRISES INC.



Principal Place of Business

120 NORTH US HWY 1  
TEQUESTA FL 33469

Mailing Address

120 NORTH US HWY 1  
TEQUESTA FL 33469

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

NELSON, EDWIN J  
120 NORTH US HWY 1  
TEQUESTA FL 33469

3. Date Incorporated or Qualified

10/12/1970

3a. Date of Last Report

02/14/1995

4. FEI Number

59-1305401

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85

Zip Code

11. Pursuant 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 registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person named in the statement above

Signature of the Agent named in the statement above

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

PD  
NELSON, EDWIN J  
370 RIVERSIDE DRIVE  
TEQUESTA FL

DELETE

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

2. TITLE  
2. NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

3. TITLE  
3. NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

4. TITLE  
4. NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

5. TITLE  
5. NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

DELETE

6. TITLE  
6. NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Edwin J. Nelson  
EDWIN J. NELSON

3/10/96

407-747-2000

Date

Day Phone

CR2E034 (12/95)