## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # 474618**

1. Entity Name
GLOBE AERO LTD., INCORPORATED

FILED Jan 08, 2004 08:00 AM Secretary of State

Principal Place of Business 3240 AIRFIELD DR. E., #1 LAKELAND, FL 33811 US Mailing Address
P.O. BOX 5775
LAKELAND, PL 33807-5775 US

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01062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-1591495 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

WALDMAN, DONNA 3240 AIRFIELD DR. E., #1 LAKELAND, FL 33811

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the plans of registered agent.	surpose of changing its registered of	ffice or s	registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	it applicable. PACITE. Registered Age	ni signatun	o required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.	, <sub>□</sub>	\$5.00 May Be Addod to Fees	
16.	OFFICERS AND DIREC	CTORS			
TITLE HAME STREET ADDRESS CITY-ST-ZEP	ST WALDMAN,DONNA C 1054 SUGARTREE DR S LAKELAND, FL				(100000000748
TITLE HAME STREET ADDRESS CITY-ST-ZBP	PD WALDMAN,PHILIP 1054 SUGARTREE DR S LAKELAND, FL				UDDDDDDD748 (1/99/04-80010-805 150.00
TITLE NAME STREET ADDRESS SITY-ST-ZEP	D WALDMAN, DONNA C. 1954 SUGAR TREE DR SO LAKELAND, FL		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			٠	IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-SI-ZIP					
TRILE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby	certify that the information supplied with this to the this report or supplemental report is true	illing does not qualify for the exempted accurate and that my signature	ion state	ed in Section 119.07(3 eve the same legal eff	(ii). Florida Statutes. I further certify that the information ect as if made under oath, that I am an officer or director

12. I hereby certify that the information supplied with this filling 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 suppliemental 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 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.

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ALANA DONNA C. WALDMAN

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863)444-2451