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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 28, 1999 8:00 am Secretary of State

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DOCUMENT # 479250

GLOBAL REALTY INVESTORS, INC.

PRINCIPAL PLACE OF Business ABAING Address P.O. BOX 40258 MANU BEACH FL 33140 US 3. Date incorporation of Qualified 07/16/1975 2. Phroppa Place of Business 2. A Mailing Address P.O. BOX 40258 MANU BEACH FL 33140 3. Date incorporation of Qualified 07/16/1975 3. Date incorporation of Qualified 07/16/1975 3. Date incorporation of Qualified 07/16/1975 5. Certificate of Status Desired Per Per Status Desired Per Status Desired Per Per Status Desired Per Status Desired Per Per Status Desired De										
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Suite, Apt. #, etc. 27 City & State Size Country Country City Country	2. Principal Pla	ace of Business	— ·	2a. Mailing Address					→	<u>-</u>
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Zip Country Zip Country Brand Contribution Address of Fees Address of Current Registered Agent 9 8. This corporation owers the current year intamplies 1 9 9 10 10 Name and Address of New Registered Agent 9 10 Name and Address of New Registered Agent 9 10 Name and Address of New Registered Agent 9 10 Name and Address of New Registered Agent 9 10 Name and Address of New Registered Agent 9 10 Name and Address of New Registered Agent 9 10 Name and Address of New Registered Agent 9 10 Name and Address of New Registered Agent 9 10 Name	22		27	27					Fee Re	equired
Personal Property Tax. Yes None and Address of Current Registered Agent 10. Name and Address of New Registered	23		28	28			, , , -		,	- 1
3. Name and Address of Current Registered Agent WINKELMAN, CHARLES L. 5500 COLLINS AVE 90 MIAMI BEACH FL 33140 19. Value and Address (P.O. Box Number is Not Acceptable) 19. Value and Address of New Registered Agent 19. Value and Address (P.O. Box Number is Not Acceptable) 19. Value and Number is Not Acceptable) 19. V		Country	Zip		try			ent year inta		,,,
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WINKELMAN, CHARLES L. 5500 COLLINS AVE 90 MIAMI BEACH FL 33140 11. Pursuant to the provisions of Srctions 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Find Statules, the above-named corporation's board of circetors. I hereby accept the approximations of control of 05005, Find Statules Statules. SIGNATUFE Signature, Specific private in an of registered agent and task indeptable. WINKELMAN, CHARLES L. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS NIND DIRECTOR'S IN 12. WINKELMAN, CHARLES L. SIGNATURE WINKELMAN, CHARLES L. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS NIND DIRECTOR'S IN 12. VINKELMAN, CHARLES L. STREET ADDRESS STREET ADDRESS MAMI BEACH FL 33140 DELETE 13. THE Change Addition ACOTY-ST-2P MIAMI FL DELETE 31. THE Change Addition ACOTY-ST-2P MIAMI FL DELETE 31. THE Change Addition ACOTY-ST-2P MIAMI FL DELETE 31. THE Change Addition Addition ACOTY-ST-2P MIAMI FL DELETE 31. THE Change Addition ACOTY-ST-2P THE NAME 31. STREET ADDRESS 32. STREET ADDRESS 33. STREET ADDRESS 34. CITY-ST-2P THE MAME DELETE 31. STREET ADDRESS 34. CITY-ST-2P THE MAME 35. STREET ADDRESS 34. CITY-ST-2P THE MAME 35. STREET ADDRESS 34. CITY-ST-2P THE MAME 35. STREET ADDRESS 35. STREET ADDRESS		9. Name and Address of Curre	ent Registered Agent		<u> </u>		10. Name and Address of New R	egistered	Agent	
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MIAMI BEACH FL 33140 84 City FL 85 Zip C ride 11. Pursuant to the provisions of Scictions 607.0502 and 607.1508, Florida Statutes, the above-named or reportation submile this statement for the purpose of changing its rajestered office or registered agent, or both, in the State of Florida Statutes, when above-named or reportation submile this statement for the purpose of changing its rajestered office or registered agent, or both, in the State of Florida Statutes, the above-named or reportation submile this statement for the purpose of changing its rajestered office or registered agent, and a complete onlighted agent and a complete office or registered accept the approximent as registered agent. In the purpose of changing its rajestered office or registered of the state of registered accept the approximent as registered agent. In the purpose of changing its rajestered of the state of the purpose of changing its rajestered of the state of the purpose of changing its rajestered of the state of the purpose of changing its rajestered of the state of the purpose of changing its rajestered of the state of the purpose of changing its rajestered of the state of the purpose of changing its rajestered of the purpose of changing its rajestered of the state of the purpose of changing its rajestered of the purpose of chang				82 Street		et Acdress	(P.O. Box Number is Not Accepta	ble)		
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11. Pursuant to the provisions of Scetions 807.0502 and 607.1508. Florida Statutes, the above-named or proration submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of circctors. I hereby accept the app ointment as registered agent. I am familiar with, and an cept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE The	MIAW	II BEAUTI FL 33140		[]	33					ļ
11. Presuent to the provisions of Scicions 607 0500 and 607 1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its rapidstered office or registered agent, or both, in the State of Florida. Stoch change was unthorized by the corporation's board of clirectors. I hereby accept the app cintment as reg shered agent. I am familiar with, and an cept the obligations of, Section 607.0505, Flurida Statutes. SIGNATUF E 12.				-	34 City	,			85 Zip (Code
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T2.	SIGNATUF E	Signature to a sileted po an of marctared po	ont and little if analizable /NOT	E: Decistared A	nent synah	ure required wit	nen reinstation)	DATE		
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14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.0°(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 the my name appears in Block 12 or Block 13 if change I, or on an attachment with an address, with all other like empowered.

SIGNATURE: