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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 742991

1. Corporation Name

GLOBAL FOUNDATION, INC.

Principal Place of Business

P.O. BOX 249055
CORAL GABLES FL 33124-9055
US

Mailing Address

6200 LEONARDO ST
CORAL GABLES FL 33146-3338
US



2. Principal Place of Business

21 P.O. Box 249055

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.
N/A

27 Suite, Apt. #, etc.

23 City & State

CORAL GABLES, FLORIDA

28 City & State

24 Zip 33124-9055

Country USA

29 Zip

Country

3. Date Incorporated or Qualified

05/24/1978

4. FEI Number

59-1887705

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

9. Name and Address of Current Registered Agent

KURSUINOGLU, SEVDA A.
6200 LEONARDO ST.
CORAL GABLES FL 33146

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Sevda Kursunoglu (Sevda Kursunoglu

V/P & Treasurer

01/14/1999

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME KURSUINOGLU, BEHRAM N.
STREET ADDRESS 6200 LEONARDO STREET
CITY-ST-ZIP CORAL GABLES FL

TITLE SD ☐ DELETE

NAME PERLMUTTER, ARNOLD
STREET ADDRESS 6790 S.W. 52ND ST.
CITY-ST-ZIP MIAMI FL

TITLE D ☐ DELETE

NAME COUTURE, JEAN
STREET ADDRESS 3 RUE HENRI HEINE-IFE
CITY-ST-ZIP PARIS, FRANCE

TITLE VTD ☐ DELETE

NAME KURSUINOGLU, SEVDA A.
STREET ADDRESS 6200 LEONARDO ST.
CITY-ST-ZIP CORAL GABLES FL

TITLE D ☐ DELETE

NAME LAMB, WILLIS E., JR.
STREET ADDRESS 848 N. NORRIS AVE.
CITY-ST-ZIP TUCSON AR

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Behram Kursunoglu SIGNATURE REQUIRED

Behram N. KURSUINOGLU

January 14, 1999

(305) 669-9411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/198)