FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ' 'ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A97000002280

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 MAR 1 1 PM 12: 25

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GLOBALNET MARKETIA	16 GROVE Ital.				
GLOBALNET MARKETING GROUP, Ltd. Mailing Address Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
4405 Woodstock Drive SAME				\$500.00	
Suite B			3a. Date of Last Report		
West Palm Beach, FL 33409			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	28. Principal Office Address		FLORIDA, USA	\$1,301-13	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
City & State	City & Slate		7. Certificate of Status Desired	U Not Applicable	
Zip Country	Zip Country		Fee Required		
			8. Make check payable to: Dept. o	8. Make check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office			
TERESA BETANCOURT 603 AVENIDA Alegre West Palm Beach, PL 33405		Name			
		Street Address (P.O. Box Number is Not Acceptable)			
		Suite, Apt. #, etc.			
		City	FL Zip Code		
SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
11. Name(s) of General Partner(s)	11a. Address of Each Genera (Do NOT Use Post Office Bo			11c. Registration/ Document Number	
MICHAEL MONTES	1		+ PAIN BEACH, FL334	(09	
JUANITH MONTES	4 4	" 10		(9)	
			600002 -02/06 *****1	4243267 4243267 5/9801124006 41.25 ****141.25	
				ide	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					
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 release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access, if further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee embowered to execute this report as required by chapter 620, Florida Statutes.					
SIGNATURE DATE 1/13/98 Typed or Printed Name of General Partner Signing Form Michael Montes Devime Telephone Number (56) 478-5866 x 2604					
Typed or Printed Name of General Partner Signing Form	lichAEL Montes	.	Daytime Telephone Number	61)478-5866×2604	