2002 Uniform Business Report (UBR)

Mar 27, 2002 8:00 am Secretary of State DOCUMENT # F01000004679 1. Entity Name 03-27-2002 90093 005 ***150 00 GLOBAL MAIL BOXES EXPRESS, INC. Principal Place of Business Mailing Address 55 GLENLAKE PARKEWAY. NE 55 GLENLAKE PARKEWAY, NE ATLANTA GA 30328 ATLANTA GA 30328 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For <u>58-2642128</u> APPLIED FOR Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ▼ Addition Michael L. Eskew_ NAME NAME AMOS, JAMES H JR. 55 Glenlake Parkway NE STREET ADDRESS 6060 CORNERSTON COURT WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN DIEGO CA 92121-3795 Atlantz, GA 30328 AT, AS TITLE Delete TITLE Addition A Eugene A. Pica NAME NAME CALVERT, ELIZABETH W 55 Glenlake Pkuzy NE STREET ADDRESS STREET ADDRESS 55 GLENLAKE PARKEWAY, NE CITY-ST-ZIP CITY-ST-ZIP Atlanta, GA 30328 ATLANTA GA 30328 Delete TITLE ☐ Change ☐ Addition NAME DAVIS, D. SCOTT STREET ADDRESS STREET ADDRESS 55 GLENLAKE PARKEWAY, NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30328 Change TITLE ☐ Delete TITLE ☐ Addition D NAME DUFFY, JOHN A STREET ADDRESS STREET ADDRESS 55 GLENLAKE PARKEWAY, NE CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30328 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME FIRESTONE, JEFFREY D STREET ADDRESS STREET ADDRESS 55 GLENLAKE PARKEWAY, NE CITY-ST-ZIP CITY-ST-7IP <u>atlanta ga 30328</u> TITLE □ Delete TITLE ☐ Change ☐ Addition NAME KELLY, JAMES P NAME STREET ADDRESS 55 GLENLAKE PARKEWAY, NE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30328

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

BEQUEGGE A. Pica SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-02 CHOH)828- 6093

FILED