

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 20 AM 11:14

DOCUMENT # F92000000370 (8)

1. Corporation Name

GLOBAL INDUSTRIAL SERVICES INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
71 SOUTH CENTRAL AVENUE **71 SOUTH CENTRAL AVENUE**
VALLEY STREAM NY 11580 **VALLEY STREAM NY 11580**

3. Date Incorporated or Qualified **11/05/1992** 3a. Date of Last Report **05/01/1994**
4. FEI Number **11-3053562** 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**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
POURBAIX, FRED
2760 NW 30TH WAY
LAUDERDALE LAKES FL 33311
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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARTZ, SCOTT	1.2 NAME	
STREET ADDRESS	25 JUNIPER LANE	1.3 STREET ADDRESS	
CITY - ST - ZIP	MUTTONTOWN NY 11791	1.4 CITY - ST - ZIP	
TITLE	VCV	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FINE, LONNIE	2.2 NAME	
STREET ADDRESS	301 PEPPERIDGE ROAD	2.3 STREET ADDRESS	
CITY - ST - ZIP	HEWLETT NY 11557	2.4 CITY - ST - ZIP	
TITLE	DS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FINE, PERRY	3.2 NAME	
STREET ADDRESS	280 DOLPHIN DRIVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	HEWLETT NECK NY 11598	3.4 CITY - ST - ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, WALTER	4.2 NAME	
STREET ADDRESS	43 NORTH DRIVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	GREAT NECK NY 11021	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I 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 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 in or out of state; 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 12 or Block 13 if changed, or on an all change with an address.

SIGNATURE: [Signature] **PRESIDENT** 1/31/95 516561-1700
DATE: _____ (Signature) _____