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

PROFIT CORPORATION ANNUAL REPORT



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

F95000002945 (2)

DOCUMENT #

1. Corporation Name

SIGNATURE:

GLOBA	L DYNAMICS, INC.						
Principal Place o	of Business	Mailing Address			. 46111 98111 48 1	11018 (B())	- 4-25: 2() 164)
SUITE 355 1350 TREAT I WALNUT CRE		SUITE 355 1350 TREAT BLVD. WALNUT CREEK CA	94596	3. Date Incorporated or Qualified 3a. Date of Last Report 06/19/1995			:port
2. Principal Plac	ne of Business	2a. Mailing Address		4. FEI Number	J		Applied For
1	De Of Dustriess	26		68-0117648		├ ─- ├	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional Required
City & State		City & State		6. Election Campaign Financing			May Be
Sily & State		28		Trust Fund Contribution		•	to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i		under s	199.032,
<u> </u>	25	29	30	Florida Statutes Yes 10. Name and Address of New R		cont	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New K	egistered A	gent	
0.7.00	DODATION OVOTERS						
	RPORATION SYSTEM OUTH PINE ISLAND ROAD		82 Street Add	ress (P.O. Box Number is Not Acceptab	ile)		
PLANTA'	TION FL 33324		83				
			84 City		FL	85 Zip	Code
		1007 4500 E Out		ration submits this statement for the pur rd of directors. I hereby accept the appo		l l	ogistored offic
BIGNATURE _	Signature, typed or printed name of registered agent an OFFICERS AND	DIRECTORS	OTE Registered Agent signature require 13.	id when reinstating! ADDITIONS/CHANGES TO OFF	···		
TITLE	PD	☐ DELETE	1. 1 TITLE		L_] Change	☐ Addition
IAME	SHARPS, PAUL		1 2 NAME				
IREET ADDRESS	425 STONEY BROOK DRIVE DANVILLE CA 94506		1 3 STREET ADDRESS				
ITY-ST-ZIP	VID VID	C) DELETE	1 4 CHY- ST-ZIP 2 1 TITLE		Г	Change	Addition
4AME	BUTLER, CAROLYN		2 2 NAME				_
STREET ADDRESS	1960 GLENHAVEN AVENUE		2.3 STREET ADDRESS				
CITY - ST-ZIP	WALNUT CREEK CA 94595		2.4 CITY - ST - ZIP				
TITLE	C	☐ DELETE	3 1 TITLE] Change	☐ Addition
NAME	Butler, Perry		3 2 NAME				
STREET ADORESS	1960 GLENHAVEN AVENUE		3.3 STREET ADDRESS				
CITY-S1-ZIP	WALNUT CREEK CA 94595		3 4 CITY - ST - ZIP			7 Crosss	☐ Addition
(TLE		☐ DELETE	4. 1 TITLE		L] Change	Muorition
IAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
DITY-ST-ZIP		DELETE	4 4 CITY - ST - ZIP 5 1 TITLE		Г	Change	Addition
OTLE IANAS		C) pectit	5.2 NAME		_		_
NAME STREET ADDRESS			5.3 STREET ADDRESS				
OTY+ST-ZIP			5.4 CITY-ST-ZIP				
INTLE THE THE STATE		☐ DELETE	6. 1 TITLE		Ξ] Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6 3 STREET ADDRESS				
CITY - S1 - 7IP	_	$\overline{}$	6.4 CITY - ST - ZIP				
14. I do hereby certify that oath; that	y certify that the information supplied w the information indicated op this applied am an officer or director of the corpor Block 12 or Block 13 perianged, or or	at report or superemental an ation of the receiver or trust	inual report is true and accur tee empowered to execute th	for the exemption stated in Section 119 ate and that my signature shall have the his report as required by Chapter 607, Fl			

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96

(510)946-0601

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