

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F95000006102 (6)**

1. Corporation Name

GLOBAL MARKETING, INC.



Principal Place of Business

**25188 MARION AVE., #VILLA 28
PUNTA GORDA FL 33950**

Mailing Address

**25188 MARION AVE., #VILLA 28
PUNTA GORDA FL 33950**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

12/14/1995

3a. Date of Last Report

4. FEI Number

65-0578535

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

9. Name and Address of Current Registered Agent

**STROM, KARON
25188 MARION AVE., #28
PUNTA GORDA FL 33950**

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 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

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME **PVST
STROM, KARON**
STREET ADDRESS **25188 MARION AVE., #28**
CITY, ST, ZIP **PUNTA GORDA FL 33950**

1.2 TITLE ☐ DELETE

NAME **DC
STROM, KARON**
STREET ADDRESS **25188 MARION AVE., #28**
CITY, ST, ZIP **PUNTA GORDA FL 33950**

1.3 TITLE ☐ DELETE

NAME **STROM, KARON**
STREET ADDRESS **25188 MARION AVE., #28**
CITY, ST, ZIP **PUNTA GORDA FL 33950**

1.4 TITLE ☐ DELETE

NAME **STROM, KARON**
STREET ADDRESS **25188 MARION AVE., #28**
CITY, ST, ZIP **PUNTA GORDA FL 33950**

1.5 TITLE ☐ DELETE

NAME **STROM, KARON**
STREET ADDRESS **25188 MARION AVE., #28**
CITY, ST, ZIP **PUNTA GORDA FL 33950**

1.6 TITLE ☐ DELETE

NAME **STROM, KARON**
STREET ADDRESS **25188 MARION AVE., #28**
CITY, ST, ZIP **PUNTA GORDA FL 33950**

1.7 TITLE ☐ DELETE

NAME **STROM, KARON**
STREET ADDRESS **25188 MARION AVE., #28**
CITY, ST, ZIP **PUNTA GORDA FL 33950**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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 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 under oath, that I am an officer or director of the corporation or the registered or listed empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change of office or an attachment with an address.

Karon Strom
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-96 (941)
637-6091

CR2E034 (12/95)