
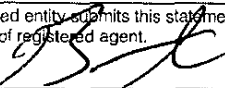
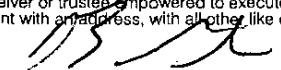


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Jan 23, 2004 8:00 am
Secretary of State

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DOCUMENT # G01062		Secretary of State 01-23-2004 90043 012 ***150.00	
1. Entity Name GLOBAL TELEPHONE & ELECTRONIC PRODUCTS, INC.			
Principal Place of Business 2915 ANVIL STREET NORTH ST PETERSBURG, FL 33710 US		Mailing Address 2915 ANVIL STREET NORTH P.O. BOX 40987 ST PETERSBURG, FL 33743 US 33710	
2. Principal Place of Business		3. Mailing Address 2915 Anvil Street N. Suite, Apt. #, etc. Delete 2nd Line (NO P.O. Box) City & State St. Petersburg FL Zip 33710 Country US	
Suite, Apt. #, etc.		01132004 Chg-P CR2E034 (10/03)	
City & State		4. FEI Number 59-2229776 Applied For Not Applicable	
Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JACOBS, CAROL G. 2915 ANVIL STREET NORTH ST. PETERSBURG, FL 33710		7. Name and Address of New Registered Agent Name SMALL, BRUCE J. Street Address (P.O. Box Number is Not Acceptable) 2915 Anvil Street North City St. Petersburg FL Zip Code 33710	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Bruce J. Small President 1/20/04 <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP STP JACOBS, CAROL G. 2915 ANVIL STREET, NORTH ST. PETERSBURG, FL <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D JACOBS, CAROL G. 2915 ANVIL STREET, NORTH ST. PETERSBURG, FL <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP VP SMALL, BRUCE J. 2915 ANVIL ST NO ST PETERSBURG, FL <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP STP SMALL, BRUCE J. 2915 ANVIL ST No St. Petersburg FL 33710 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:  Bruce J. Small, President 1/20/04 <small>(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #)</small>			