FILE NOW: FILING FI PROFIT CORPORATION ANNUAL REPORT 1997		FL	FTER MAY 1 IS \$550.00 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			FILED Jan 29 1997 8:00am Secretary of State			
GLOBAL Principal Place 215 GOOLSBY		Mailing Ac 215 GOOL	(9) Ddress SBY BLVD. D BCH. FL 334	42-3001					
						 Date Incorporated or Qualified 12/29/1986 		of Last R 3/1996	eport
	ace of Business	28. Mailing Address				4. FEI Number			plied For
Suite, Apt.	#, etc.		26 Suite, Apt. #, etc.			59-2780776			ot Applicable Additional
2		27				5. Certificate of Status Desired		Fee Re	equired
City & State 3	1	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
Zip Country		Zip	Zip		untry	8. This corporation has liability fo			. 199.032,
4	25 9. Name and Address of Curre	29 nt Registered A	gent	30		Florida Statutes 10. Name and Address of New F	Yes		
SIGNATURE	o the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered ag				84 City bove-named cor dot d by the corporative corporative d Agent signature require require	poration submits this statement for the tion's board of directors. I hereby acc ired when renotating)	┍┍╻╷	.	Code ts registered registered
12.		D DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFF			
TTLE LAME STREET ADDRESS STTY - ST - ZIP	PÕ BENITAH, MOSHE 3212 NW 88TH WAY CORAL SPRINGS FL 33065				4		L] Change	Addition
ITLE IAME ITREET ADDRESS	SD BENITHA, OSSIE PALLA 608 WEY BRIDGE COURT LAKE MARY FL		DELETE	2.1 T 2.2 N 2.3 S	TLF		Ľ	Change	Addilion
NTLE NAME STREET ADDRESS CITY-ST-ZIP	TD BENITAH, ADI 3212 NW 88TH WAY CORAL SPRINGS FL		DELETE	3.1 T 3.2 N 3 3 S	1716			Change	Addition
ITLE IAME STREET ADDRESS STTY - ST - ZIP			DELETE	4.1 T 4.2 I 4.3 S	ITLE		Ĕ	Change	Addition
tle Ame Treet address			DELETE	5 1 1 5.2 M 5.3 S	TLE AME TREFT ADDRESS		Ľ] Change	Addilion
ITLE ITLE IAME ITREET ADDRESS	• .		DELETE	6.1 T 6.2 N 6 3 S	AME TREFT ADDRESS		L	Change	Addition
Informatio	y certify that the information supplie n indicated on this annual report or ficer or director of the corporation o n Block 12 or Block 13 if changed, o	supplemental ar	inual report is	ify for the true and	accurate and tha	d in Section 119.07(3)(i), Florida Statu t my signature shall have the same leg rt as required by Chapter 607, Florida	gal effect as if Statutes; and	made un that my r	der oath; tha name

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- Borger Moulination

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