FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

P O BOX 521704 MIAMI FL 33152

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M47105

Principal Place of Business

8302 NW 14TH ST.

MIAM! FL 33126

UNITED GLOBE INTERNATIONAL CORPORATION

					0E/E // 1001		
2. Principal P	lace of Business 2a. Mailing Address				4. FEI Number	Ap	plied For
21	26			•	59-2780838		ot Applicable
Suite, Apt.	#, etc. Suite, Apt. #, etc.			<u>-</u>	المراجعة الم	- · \$8.75·/	Additional -
22	27				5. Certificate of Status Desired	Fee Re	quired
City & Stat					6. Election Campaign Financing	\$5.00	May Do
¬ ′	·				Trust Fund Contribution		
23		28	Country				
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible		
24	25 29 30			Personal Property Tax. Yes No			
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	stered Agent	
•				Name			ļ
CERNUDA, RAUL					(0 0 D M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·	
5301 SW 132 AVE.				Street Address (P.O. Box Number is Not Acceptable)			
				83			
			- '	,		FL	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above	e-named corpo	ration submits this statement for the pur	pose of changing its	registered
office or r	registered agent, or both, in the State	of Florida. Such change was au	uthorized by	the corporation	n's board of directors. I hereby accept the	e appointment as re	gistered
→ agent. La	m familiar with, and accept the obliga	tions of, Section 607.0505, Flor	ida Statutes	•			
SIGNATURE						DATE	
	Signature, typed or printed name of registered ager	· 		nt signature required	and relicion (g) 1 , 1 , 1	DATE	DP IN 12
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PT	☐ DELETE	1.1 TITLE	į		Change	- 🔲 Addition
NAME	CERNUDA, CELIA		1.2 NAME		•		
STREET ADDRESS	F004 604 4060 B 41/F		13 STREET	T ADDRESS	•		*
CITY-ST-ZIP			1.4 CITY-S	1-ZP		Change	Addition
TITLE	_		2.1 TITLE			. Change	
NAME	CERNUDA, RAUL		2.2 NAME				•
STREET ADDRESS	5301 SW 132 AVE.		2.3 STREE	T ADDRESS		,	
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-S	ST-ZIP			
	IVIN WYS I TO	☐ DELETE	3.1 TITLE			Change	Addition
TITLE	A to the second				i		
NAME			3.2 NAME				
STREET ADDRESS	[`		3.3 STREE	TADORESS		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Section .
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		<u>. 19 134 444</u>	7. 1911 H
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	4.1 TITLE			` ☐ Change	Addition
NAME			4. 2 NAME				
				T ADDRESS		•	
STREET ADDRESS						•	
CITY-ST-ZIP		——————————————————————————————————————	4.4 CITY-S	T-ZIP		Псь	M Addition
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME			* *,*	
STREET ADDRESS		•	5.3 STREE	T ADDRESS	•		
	h ,		5.4 CITY-S	т- 2 1Р	· • • • • • • • • • • • • • • • • • • •		
CITY-ST-ZIP	1	☐ DELETE	6.1 TITLE			Change	Addition
TITLE		C beceit			•		. —
NAME			6.2 NAME				
STREET ADDRESS	· .		6.3 STREE	TADDRESS			
CITY-ST-ZIP		-	6.4 CITY-S	T-ZIP	•	•	
14. I hereby	certify that the information supplied w	th this filing does not qualify for	the exempt	ion stated in S	ection 119.07(3)(i), Florida Statutes. I fu shall have the same legal effect as if m red by Chapter 607, Florida Statutes; ar	rther certify that the	information
indicated	on this annual report or supplementa	annual report is true and accur	rate and tha	t my signature	shall have the same legal effect as if m	ade under oath; that	laman
officer or	or Block 12 if changed or an an attack	ever or trustee empowered to ex	xecute this r	epoπ as requir	ed by Chapter 607, Florida Statutes; an	u mai my name app	Cal 3 II 1
BIOCK 12	OF ENDOK TO IF CHAINGEOF, OF OH AN ARRAC	annent your an aquiess, with all	Outer like 6	mpowered.	_	1	

SIGNATURE:

FILED

Feb 12, 1999 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed 02/24/1987

02-12-1999 90025 018 ***150.00