2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M70016

Entity Name: GLOBE FACILITY SERVICES INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10601 US HWY 19 N 780 94TH AVENUE NORTH PINELLAS PARK, FL 33782 LIS

SUITE 107

ST. PETERSBURG, FL 33702 US

Current Mailing Address: New Mailing Address:

780 94TH AVENUE NORTH 10601 US HWY 19 N

PINELLAS PARK, FL 33782 US SUITE 107

ST. PETERSBURG, FL 33702 US

FEI Number: 59-2973013 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SAUERS, MICHEL F SAUERS, MICHEL F 10601 US HWY 19 N 780 94TH AVENUE NORTH

PINELLAS PARK, FL 33782 US SUITE 107 ST. PETERSBURG, FL 33702 US

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.

SIGNATURE: 04/27/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

FLASKAY, NICHOLAS, FLASKAY, NICHOLAS, Name: Name: 10601 US HWY 19 N

780 94TH AVENUE NORTH, SUITE 107 Address: Address:

City-St-Zip: PINELLAS PARK, FL 33782 City-St-Zip: ST. PETERSBURG, FL 33702

Title: PCDS () Delete Title: **PCDS** (X) Change () Addition

Name: SAUERS, MICHEL F Name: SAUERS, MICHEL F

10601 US HWY 19 N Address: 780 94TH AVENUE NORTH, SUITE 107 Address: PINELLAS PARK, FL 33782 ST. PETERSBURG, FL 33702 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHEL F. SAUERS **PCDS** 04/27/2005