

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000054952

Entity Name: GLOBAL TECH LABS, INC.

FILED
Apr 19, 2004
Secretary of State

Current Principal Place of Business:

1181 S. ROGER CIRCLE
SUITE 22
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

1181 S. ROGER CIRCLE
SUITE 22
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 65-1024634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LA POINTE, RICHARD
1181 S. ROGERS CIRCLE
SUITE 22
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MARCHESO, JOHN N
Address: 1870 EAST CAYMAN RD
City-St-Zip: VERO BEACH, FL 32963

Title: DS () Delete
Name: LAPOINTE, RICHARD
Address: 18650 SKYHILL RD
City-St-Zip: HARRISON, ID 83833

Title: DT () Delete
Name: CRAWFORD, JAMES T
Address: 5408 LAKEFRONT BLVD, APT B
City-St-Zip: DELRAY BEACH, FL 33484

Title: DV () Delete
Name: VAUGHAN, DAVID E
Address: 301 MICHIGAN ST
City-St-Zip: FT PIERCE, FL 34946

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JAMES T CRAWFORD

D/T

04/19/2004

Electronic Signature of Signing Officer or Director

Date