2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000080667

Entity Name: GLOBEX AMERICA, CORP.

FILED Mar 31, 2004 Secretary of State

Current Principal Place of Business:

4701 N. FEDERAL HWY #365 - BOX C-9

LIGHTHOUSE POINT, FL 33064

Current Mailing Address:

FEI Number: 65-1034726

New Mailing Address:

365-C9

FEI Number Not Applicable ()

4701 N. FEDERAL HWY

4701 N. FEDERAL HWY #365 - BOX C-9

LIGHTHOUSE POINT, FL 33064

4701 N. FEDERAL HWY 365-C9

LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

LIGHTHOUSE POINT, FL 33064

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ARRUDA, ROSEMIERE P 4701 N. FEDERAL HWY #365 - BOX C-9

LIGHTHOUSE POINT, FL 33064

ARRUDA, ROSEMEIRE P 4701 N. FEDERAL HWY 365-C9

LIGHTHOUSE POINT, FL 33064 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: ROSEMEIRE P ARRUDA

03/31/2004

Certificate of Status Desired ()

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete ARRUDA, ROSEMEIRE P Name:

4701 N. FEDERAL HWY #365 - BOX C-9 Address:

City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: () Delete Name: DE SOUSA, MARIA E 1036 MAIN STREET B Address: City-St-Zip: CHATHAM, MA 02633

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition ARRUDA, ROSEMEIRE P Name: 4701 N. FEDERAL HWY # 365-C9 Address: City-St-Zip: LIGHTHOUSE POINT, FL 33064

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: ROSEMEIRE P ARRUDA PT 03/31/2004