


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2005 8:00 am
Secretary of State

03-08-2005 90164 011 ***150.00

DOCUMENT # P0000104603

1. Entity Name
GLOBE INTERNATIONAL REALTY AND INVESTMENTS, INC.



Principal Place of Business: **1500 UNIVERSITY DR #247 CORAL SPRINGS FL 33071**

Mailing Address: **1500 UNIVERSITY DR #247 CORAL SPRINGS FL 33071**

2. Principal Place of Business: **766 Riverside Drive**

3. Mailing Address: **766 Riverside Drive**

Suite, Apt. #, etc.

City & State: **Coral Springs, Florida**

City & State: **Coral Springs, FLORIDA**

Zip: **33071** Country: **USA**

Zip: **33071** Country: **USA**



1st MOORE CR2E034 (10/04)

4. FEI Number: **65-1054081** Applied For: Not Applicable:

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent: **GUEVARA, CESAR 1500 UNIVERSITY DR #247 CORAL SPRINGS FL 33071**

7. Name and Address of New Registered Agent: Name: _____ Street Address (P.O. Box Number is Not Acceptable): _____ City: **FL** Zip Code: _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  **Cesar Guevara** DATE: **02/21/05**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUEVARA, CESAR 1500 UNIVERSITY DR #247 CORAL SPRINGS FL 33071 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Cesar Guevara 766 Riverside Drive Coral Springs, FL 33071 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Cesar Guevara** DATE: **02/21/05** DAYTIME PHONE #: **954-227-7507**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #