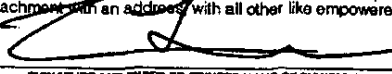


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-12-2004 90672 027 ***150.00

DOCUMENT # P01000004047 1. Entity Name GLOBAL TOO ENTERPRISES INC																													
Principal Place of Business 195 S. WESTMONTE DR., STE. C ALTAMONTE SPRINGS, FL 32714			Mailing Address 195 S. WESTMONTE DR., STE. C ALTAMONTE SPRINGS, FL 32714																										
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address P.O. Box 2184 Suite, Apt. #, etc. City & State Windermere FL Zip 34786																											
Country US		4. FEI Number 55-079-2935 APPLIED FOR																											
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent HOOPER, C. DWIGHT 195 S. WESTMONTE DR., STE. C ALTAMONTE SPRINGS, FL 32714																											
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:  DATE: 4/7/2004 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, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">P</td> <td style="width: 30%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>HOOPER, DWIGHT C</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>195 S. WESTMONTE DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ALTAMONTE SPRINGS, FL 32714</td> <td></td> </tr> </table>			TITLE	P	☐ Delete	NAME	HOOPER, DWIGHT C		STREET ADDRESS	195 S. WESTMONTE DR		CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;"></td> <td style="width: 30%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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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: 			DATE: 4/7/2004 DAYTIME PHONE: 407-909-9718																										