


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90174 022 ***158.75

DOCUMENT # P02000095088 1. Entity Name GLOBE DEVELOPMENT & MANAGEMENT INC.					
Principal Place of Business 13250 SW 279 TERR HOMESTEAD, FL 33032			Mailing Address 13250 SW 279 TERR HOMESTEAD, FL 33032		
2. Principal Place of Business <u>3717 NE 15 ST</u> Suite, Apt. #, etc.		3. Mailing Address <u>3717 NE 15 ST</u> Suite, Apt. #, etc.			
City & State <u>Homestead FL</u>		City & State <u>Homestead FL</u>		4. FEI Number 04-3715064	
Zip <u>33033</u>		Country <u>Miami Dade</u>		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LOCTAR, EVANS 13250 SW 279 TERRACE HOMESTEAD, FL 33032				7. Name and Address of New Registered Agent Name <u>Loctar, Evans J.</u> Street Address (P.O. Box Number is Not Acceptable) <u>3717 NE 15 ST</u> City <u>Homestead</u> <u>FL</u> Zip Code <u>33033</u>	
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: <u>[Signature]</u> <u>EVANS J. Loctar</u> <u>4/28/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 BENJAMIN, AUSTIN E 19810 SW 118 PL MIAMI, FL 33177	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V LOCTAR, EVANS 13250 SW 279 TERR HOMESTEAD, FL 33032	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>Loctar, Evans J.</u> <u>3717 NE 15 ST</u> <u>HOMESTEAD, FL 33033</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V GRIFFIN, ALMEVIS 18495 8.DIXIE HWY.#149 MIAMI, FL 33157	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<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: <u>[Signature]</u> <u>EVANS J. Loctar</u> <u>4/28/05</u> <u>305-258-9111</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					