2004 FOR PROF CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000096693

1. Entity Name

GLOBAL EXPRESS COMMUNICATIONS INC.



Principal Place of Business

4336 17TH AVE. NORTH ST. PETE, FL 33713 Mailing Address

4336 17TH AVE. NORTH ST. PETE, FL 33713

FILED Apr 12, 2004 08:00 AM Secretary of State



04022004

No Chg-P

CR2E034 (10/03)

4. FEI Number 05-0528086 Applied For Not Applicable

5. Certificate of Status Desired

¥

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NGUYEN, ANTHONY H 4336 17TH AVE. NORTH ST. PETE, FL 33713

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|---|--|--|---------|--------------------------------|---|
| 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registated Agent augmature required when reinstaking) DATE | | | | | |
| FILE NOWIII FEE IS \$150.00 9. Election Campaign Finar After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. | | | cińg 🔲 | \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | | | | |
| RILE NAME STREET ADDRESS CITY-ST-ZIP | D NGUYEN, ANTHONY H 4336 17TH AVE. NORTH ST. PETE, FL 33713 | | | | U00000109237 04/12/04-80035-012 158.75 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | IN ⁻ | THIS SPACE |
| TITLE NAME STREET ADDRESS CHY-SI-ZIP | | | | | · |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |

12. I hereby certify that the information supplied with this filling 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 path; 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE BUILD TORED OF SDIVIED NAME OF SIGNING OFFICED OF DIRECTOR

4/7/04

727-492-459

Daylime Phone #