

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P25239**

1. Entity Name

GLOBAL TECHNOVATIONS, INC.

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 OCT -1 PM 1:46

00000111

Principal Place of Business

7108 FAIRWAY DR.  
SUITE 200  
PALM BEACH GARDENS FL 33418-3757  
US

Mailing Address

7108 FAIRWAY DR.  
SUITE 200  
PALM BEACH GARDENS FL 33418-3757  
US

2. Principal Place of Business

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Zip

Country

4. FEI Number

84-1027821

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
SUITE 2202  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name Michael D. Harris

Street Address (P.O. Box Number is Not Acceptable)

1645 Palm Beach Lakes Blvd Suite 550City West Palm Beach FLZip Code 33401

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/10/01

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00.**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME MENNEN, G. JEFF  
STREET ADDRESS 258 HANOVER RD  
CITY-ST-ZIP FLORHAM PARK NJ 07932TITLE CPD ☐ Delete  
NAME WILLIS, WILLIAM C  
STREET ADDRESS 7108 FAIRWAY DR #200  
CITY-ST-ZIP PALM BEACH GARDENS FL 33418TITLE D ☐ Delete  
NAME BURD, RONALD P.  
STREET ADDRESS 444 DEVEREUX DR  
CITY-ST-ZIP VILLANOVA PA 19085TITLE D ☐ Delete  
NAME VICKAR, L. KERRY  
STREET ADDRESS 701 RICKERT ST  
CITY-ST-ZIP STATESVILLE NC 28677TITLE VTSD ☐ Delete  
NAME NATAN, DAVID  
STREET ADDRESS 7108 FAIRWAY DR STE 200  
CITY-ST-ZIP PALM BEACH GARDENS FL 33418-3757TITLE D ☐ Delete  
NAME Michael Pieterangelo  
STREET ADDRESS 6410 Poplar Ave Suite 190  
CITY-ST-ZIP Memphis TN 38119

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with a power like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)