## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300008004 (2)

GLOBAL INTERNET SALES, INC.

APPROVED AND FILED

97 JUL 31 PM 12: 35

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address 1046 SYLVIA LANE 1046 SYLVIA LANE **TAMPA FL 33613 TAMPA FL 33613** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 01/28/1993 04/11/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0388306 21 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5,00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zip Country Country Zip This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 29 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MONROE, CRAIG S 1046 SYLVIA LANE 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33613 B3** 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DEL ETE Addition TITLE 1.1 TITLE Change MONROE, CRAIG S 1.2 NAME 400002258284--1 8640 NW 24 CT. -08/05/97--01080--017 STREET ADDRESS 1.3 STREET ADDRESS **SUNRISE FL** CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETÉ 2.1 TITLE TITLE MONROE, KATHLEEN MOUROF, GLENN L. NAME 2.2 NAME 8640 NW 24 CT STREET ADDRESS 2.3 STREET ADDRESS **SUNRISE FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DFLETE Change ☐ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 DITY-ST-ZIP DELETE Channe Addition TITLE 5 1 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE.

Montoe

7/23/97

(352) 540-4153