

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000065071

1. Entity Name

GLOBAL NET TRAVEL, INC.

FILED

Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90252 019 ***150.00

Principal Place of Business

Mailing Address

~~ROYAL PALM TOWERS~~
~~1600 S. DIXIE HWY., SUITE 5AB~~
~~BOCA RATON FL 33432~~

~~670 G. RANDALL~~
~~1600 S. DIXIE HWY., SUITE 500~~
~~BOCA RATON FL 33432~~

2. Principal Place of Business

Bank of America Tower
150 E. Palmetto Park Rd.

3. Mailing Address

670 Charles P. Randall
150 E. Palmetto Park Rd.

Suite, Apt. #, etc.

500

Suite, Apt. #, etc.

#500

City & State

Boca Raton, FL.

City & State

Boca Raton, FL.

4. FEI Number

65-0441166

Applied For

Not Applicable

Zip

33432

Country

USA

Zip

33432

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RANDALL, CHARLES P
~~ROYAL PALM TOWERS~~
~~1600 S. DIXIE HWY., SUITE 5AB~~
~~BOCA RATON FL 33432~~

Name

Charles P. Randall

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

Bank of America Tower, Suite 500

150 E. Palmetto Park Rd.

City

Boca Raton

FL

Zip Code

33432

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

Charles P. Randall

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/10/01

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 \$150.00

After MAY 1, 2001 Fee will be \$550.00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME HOSKINS, ROB
STREET ADDRESS 5201 NW.. 14TH TERRACE, APT. 2
CITY-ST-ZIP FT. LAUDERDALE FL 33334

TITLE P ☐ Change ☐ Addition
NAME Hoskins, Rob
STREET ADDRESS 2800 N.E. 59th Court
CITY-ST-ZIP Ft. Lauderdale, FL. 33308

TITLE VP ☐ Delete
NAME HOSKINS, BOB
STREET ADDRESS 576 VIA VERNONA
CITY-ST-ZIP DEERFIELD BCH FL 33443

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bob Hoskins

Date

4/9/01

Daytime Phone #

561-750-5050

CR2E034 (10/00)