

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montan
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 20 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000085616 (9)

1. Corporation Name

GLOBAL AUTOS INC.

Principal Place of Business

5485 S. ORANGE BLOSSOM TRAIL
ORLANDO FL 32809

Mailing Address

10314 LA GUARDIA CT.
ORLANDO FL 32821

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/10/1993

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21 5485 S. ORANGE BLOSSOM TR

2a. Mailing Address

26 5485 S. ORANGE BLOSSOM TR

4. FEI Number

59-3214333

Applied For

Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 ORLANDO, FLORIDA

City & State

28 ORLANDO, FL 32839

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 32839

Country

25 U.S.A

Zip

29 32839

Country

30 U.S.A

8. This corporation has liability for intangible tax under § 199.012
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ARSHAD, JAVED
10314 LA GUARDIA CT.
ORLANDO FL 32821

10. Name and Address of New Registered Agent

81 Name JAVED ARSHAD
82 Street Address (P.O. Box Number is Not Acceptable)

83 11952, REEDY CREEK DR #104

84 City ORLANDO FL 85 Zip Code 32839

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 typed or printed name of registered agent and new agent

Signature typed or printed name of registered agent and new agent

Date

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	ARSHAD, JAVED
STREET ADDRESS	10314 LA GUARDIA CT.
CITY ST ZIP	ORLANDO FL 32821
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY ST ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY ST ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY ST ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY ST ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY ST ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(A), 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 or 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:

Javed Arshad
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/95 (902) 858-9194
Date