## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998

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TITLE

NAME

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NAME

STREET ADDRESS

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CITY - ST - ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000085616 (9)

GLOBAL AUTOS INC. Principal Place of Business Mailing Address 5475 8 O.B.T 5475 S O.B.T ORLANDO FL 32839 ORLANDO FL 32839 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/10/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3214333 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name ARSHAD, JAVED 10314 LA GUARDIA CT. Street Address (P.O. Box Number is Not Acceptable) 11952 REEDY CREEK DR #104 ORLANDO FL 32838 83 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, typed or printed name of registered agent and title it appealable (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change ☐ Addition ARSHAD, JAVED NAME 1.2 NAME 10314 LA GUARDIA CT. STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32821 CITY-ST-ZIP 1.4 City-St-ZiP DELETE TITLE Change 2.1 THILE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP

6.4 CITY - ST - ZIP 14. Thereby 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 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.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

☐ DELETE

DELETE

DELETE

SIGNATURE.

Change

☐ Addition

Addition

Addition

**FILED** 

Apr 13 1998 8:00am

Secretary of State