


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90091 032 ***150.00

DOCUMENT # P94000022292
 1. Entity Name
GLOBAL NATIONAL REALTY CORP., INC.




Principal Place of Business Mailing Address
6100 MIRAMAR PKWAY **6100 MIRAMAR PKWAY**
MIRAMAR, FL 33023 US **MIRAMAR, FL 33023 US**

90014450

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
6100 MIRAMAR PKWAY **1321 N.W. 196 STREET**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
MIRAMAR, FLORIDA **MIAMI, FLORIDA**

City & State City & State

Zip Country Zip Country
33023 **U.S.A.** **33169** **U.S.A.**



01182007 Chg-P CR2E034 (12/06)
 4. FEI Number Applied For
65-0479369 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
D'OYLEY, RONALD L
1321 NW 196 ST
MIAMI, FL 33169

7. Name and Address of New Registered Agent
 Name **RONALD D'OYLEY**
 Street Address (P.O. Box Number is Not Acceptable)
1321 N.W. 196 STREET
 City **MIAMI** FL Zip Code **33169**

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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE _____ DATE **01-18-07**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00
 9. Election Campaign Financing \$5.00 May Be Added to Fees
 Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	D'OYLEY, RON	
STREET ADDRESS	6100 MIRAMAR PKWY.	
CITY-ST-ZIP	MIRAMAR, FL	
TITLE		<input type="checkbox"/> Delete
NAME	N/A	
STREET ADDRESS	N/A	
CITY-ST-ZIP	N/A	
TITLE		<input type="checkbox"/> Delete
NAME	N/A	
STREET ADDRESS	N/A	
CITY-ST-ZIP	N/A	
TITLE		<input type="checkbox"/> Delete
NAME	N/A	
STREET ADDRESS	N/A	
CITY-ST-ZIP	N/A	
TITLE		<input type="checkbox"/> Delete
NAME	N/A	
STREET ADDRESS	N/A	
CITY-ST-ZIP	N/A	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RONALD D'OYLEY	
STREET ADDRESS	1321 N.W. 196 STREET	
CITY-ST-ZIP	MIAMI, FL 33169	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	N/A	
STREET ADDRESS	N/A	
CITY-ST-ZIP	N/A	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	N/A	
STREET ADDRESS	N/A	
CITY-ST-ZIP	N/A	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	N/A	
STREET ADDRESS	N/A	
CITY-ST-ZIP	N/A	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	N/A	
STREET ADDRESS	N/A	
CITY-ST-ZIP	N/A	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronald D'Oyley Date 01/18/07 Daytime Phone # 954-964-0050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR