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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000031800 (3)

GLOBAL PROSEARCH, INC.

Principal Place of Business Mailing Address 500 LAKE AVE., #146 500 LAKE AVE. #146 LAKE WORTH FL 33460 LAKE WORTH FL 33460-3809 3. Date Incorporated or Qualified 3a. Date of Last Report 04/27/1994 04/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0494404 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\subseteq \) No Zip Country Zip 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LIEBERMAN, BERNARD 500 LAKE AVE., #146 Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH FL 33460 83 Zip Code 85 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 diapplicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (96/6) DELETE TITLE 1.1 TITLE Change LIEBERMAN, BERNARD NAME . 1.2 NAME 500 LAKE AVE., #146 STREET ADDRESS 1.3 STREET ADDRESS LAKE WORTH FL 33460 CITY-ST-ZIP 1.4 CHY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 C(1 Y - S1 - Z(P TITLE DELETE 31 TITLE Addition NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE TITLE 4.1 THE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP TITLE DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ___ Change ___ Addition TITLE 6.1 TO LE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CHTY - ST - ZIP

SIGNATURE: Burniel Tiebenie Bern

erward Lieberman

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 eath; 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.

4/29/97

FILED

May 09 1997 8:00am

Secretary of State

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