FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 13 AM 11:26

DOCUMENT # P94000036765 (3)

1. Corporation Name
GLOBAL ASSETS ADVISORS, INC.

Principal Place of Business	Mailing Address
250 PARK AVE S SUITE 200 WINTER PARK FL 32789	250 PARK AVE S SUITE 200 WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/12/1994
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 59-3244522 — Applied For / Not Applicable

Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)
5. Certificate of Status Desired: X — $8.75 Additional Fee Required

City & State (23) / City & State (28)
6. Election Campaign Financing Trust Fund Contribution: ☐ — $5.00 May Be Added to Fees

Zip (24) / Country (25) / Zip (29) / Country (30)
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MICELI, JEROME F
250 PARK AVE S
SUITE 200
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL — 85 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	Chairman D/C	☒ Change ☐ Addition
NAME	VEITIA, DIEGO J	1.2 NAME	Diego J. Veitia	
STREET ADDRESS	250 PARK AVE S SUITE 200	1.3 STREET ADDRESS	250 Park Ave S Suite 200	
CITY-ST-ZIP	WINTER PARK FL 32789	1.4 CITY-ST-ZIP	Winter Park FL 32789	
TITLE	D	2.1 TITLE	President & Treasurer D/P/T	☒ Change ☐ Addition
NAME	MICELI, JEROME F	2.2 NAME	Jerome F. Miceli	
STREET ADDRESS	250 PARK AVE S SUITE 200	2.3 STREET ADDRESS	250 Park Ave S Suite 200	
CITY-ST-ZIP	WINTER PARK FL 32789	2.4 CITY-ST-ZIP	Winter Park FL 32789	
TITLE	D	3.1 TITLE	Secretary D/S	☒ Change ☐ Addition
NAME	SAKER, STEPHEN A	3.2 NAME	Stephen A. Saker	
STREET ADDRESS	250 PARK AVE S SUITE 200	3.3 STREET ADDRESS	250 Park Ave S Suite 200	
CITY-ST-ZIP	WINTER PARK FL 32789	3.4 CITY-ST-ZIP	Winter Park FL 32789	
TITLE	D	4.1 TITLE	Vice President VP Jr.	☐ Change ☑ Addition
NAME	~~JACOBS, ELMER L~~	4.2 NAME	William B. Young	
STREET ADDRESS	~~109 HOMESTEAD DR~~ Delete	4.3 STREET ADDRESS	250 Park Ave S Suite 200	
CITY-ST-ZIP	~~WOODLAND PARK CO 80863~~	4.4 CITY-ST-ZIP	Winter Park FL 32789	
TITLE	D	5.1 TITLE	Asst. Vice President AVP	☐ Change ☐ Addition
NAME	~~HALLIDAY, DONALD A~~	5.2 NAME	Laurie K. Moore	
STREET ADDRESS	~~9009 LUNETTA LN~~ Delete	5.3 STREET ADDRESS	250 Park Ave S Suite 200 Delete	
CITY-ST-ZIP	~~FALLBROOK CA 92028~~	5.4 CITY-ST-ZIP	Winter Park FL 32789	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		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)(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.

SIGNATURE: [signature] 1-10-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0016021 CP