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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000068213 (4)

GLOBAL MARKETING & MANAGEMENT, INC.

Apr 24	1998	8:00am
Secre	tary o	f State

Principal Place of Business		Mailing Address	Maiting Address			I LOUVISAN LIN JAJAN BAILI BRUN ORUK ONUK DAKA BAIDI 1860 1860 1860 11860 1111 (ODI			
222 E BULLARD PKWY TAMPA FL 33617 US		222 E BULLARD PKWY TAMPA FL 33617 US	TAMPA FL 33617			DO NOT WRITE IN THIS SPACE			
		03			<u> </u>	3. Date Incorporated or Qualified			
						09/01/1995			
	Place of Business	2a. Mailing Address				4, FEI Number			Applied For
21		26				59-3343076		i	Vot Applicable
Suite, Apt.	#, e tc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
22		27				C. Commodity of States Seemed		Fee I	Required
City & State		<u>├</u> ¬ '	City & State			6. Election Campaign Financing \$5.00 May Be			
Zip	Country	28	Country	,		Trust Fund Contribution			d to Fees
24	25		30	,		8. This corporation owes or has pa			ntangible No
<u> 67 </u>	9. Name and Address of Curren		30	·····		Personal Property Tax due June 10. Name and Address of New Re			<u> </u>
CIN	ITRON, ANGEL E		81	Nar			gioloida	- Agoin	
	21 DUNHILL DRIVE			ļ.,				· · · · · · · · · · · · · · · · · · ·	
	MPA FL 33624		82	Stre	eet Address	(P.O. Box Number is Not Accepta	ble)		
100	m A 1 C 000E4		83						
			84	City				100 7	
			j	' '			FL	_ 1	Code
Onice or r	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was au	ithorized bi	v the c	ed corporation's	tion submits this statement for the j s board of directors. I hereby acce	ourpose on the population of t	of changing pointment a	its registered s registered
	Signature, typed or printed name of registered ago		Registered Age	ent signa	ature required wt	. 8/	DATE	<u> </u>	
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AN		
TITLE	PD ANDER 5	DELETE	1.1 TITLE					☐ Change	Addition
NAME	CINTRON, ANGEL E		1.2 NAME						
STREET ADDRESS	12721 DUNHILL DRIVE		1.3 STREET		SS				
CITY-ST-ZIP TITLE	TAMPA FL	DELETE	1.4 CITY - S	T - ZIP					
NAME	VP	☐ DETER	21 1171.6					Change	☐ Addition
STREET ADDRESS	MATOS, ERIC E 222 E BULLARD PKWY		2.2 NAME		_				
	TAMPA FL		2 3 STREET		SS				
CITY-ST-ZIP TITLE	ST ST	DELETE	2. 4 City - 5 3.1 Title	ST - ZIP				Change	Addition
NAME	RAMOS, JOSE S	DELETE	3.2 NAME					☐ Change	
STREET ADDRESS	222 E BULLARD PKWY		3.3 STREET	ANNOCE	ec l				
CITY-ST-ZIP	TAMPA FL		3.4. CITY- S						
TITLE	- I will to	DELETE	4.1 TITLE	31 · ZIF				Change	Addition
NAME			4 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRES	is				
CITY-ST-ZIP			4.4 CITY-S		~				
TITLE		DELETE	5.1 TITLE	1 2.11				☐ Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET	ADDRES	is l				
CITY-ST-ZIP			5.4 CITY-S		.~				
TITLE		DELETE	5.1 TITLE	. 1.11				☐ Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			63 STREE!	ADDRES	is				
					1				

14. I hereby certify that the information supplied with this filling 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.