FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1997

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

FILED
97 APR 11 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000011280

1. Corporation Name
GlobalNet International Inc.
formerly Globalnet, Inc. (see attached)

Principal Place of Business
1284 Broad St.
Augusta, GA
30901

Mailing Address
1284 Broad St.
Augusta, GA
30901

3. Date Incorporated or Qualified: February, 1996
3a. Date of Last Report: None

2. Principal Place of Business: 753 Broad St.
Suite, Apt. #, etc.: 7th. Floor
City & State: Augusta, GA
Zip: 30901 Country: USA

2a. Mailing Address: 753 Broad St.
Suite, Apt. #, etc.: 7th. Floor
City & State: Augusta, GA
Zip: 30901 Country: USA

4. FEI Number: 59-3362727 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
Corporation Service Company
1201 Hays St.
Tallahassee, FL 32301

10. Name and Address of New Registered Agent
81 Name: Rolan Colón
82 Street Address (P.O. Box Number is Not Acceptable): 200 S. Biscayne Blvd.
83 Suite 2750
84 City: Miami FL 85 Zip Code: 33131

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.
See attached.

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

TITLE	President - Director	☒ DELETE
NAME	James S. Faller, II	
STREET ADDRESS	1284 Broad St.	
CITY-ST-ZIP	Augusta, GA 30901	
TITLE	Vice President - Director	☒ DELETE
NAME	Rolan Colón	
STREET ADDRESS	200 S. Biscayne Blvd.	
CITY-ST-ZIP	Miami, FL 33131	
TITLE	Secretary - Director	☐ DELETE
NAME	Beverley A. Candlish	
STREET ADDRESS	11 Sir Percival Court	
CITY-ST-ZIP	Markham, ON L3P 3S2 Canada	
TITLE	Treasurer	☐ DELETE
NAME	Beverley A. Candlish	
STREET ADDRESS	11 Sir Percival Court	
CITY-ST-ZIP	Markham, ON L3P 3S2 Canada	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Chairman of the Board of Directors	☒ Change ☐ Addition
1.2 NAME	James S. Faller II	
1.3 STREET ADDRESS	753 Broad St. 7th Floor	
1.4 CITY-ST-ZIP	Augusta, GA 30901	
2.1 TITLE	President - Director	☒ Change ☐ Addition
2.2 NAME	Rolan Colón	
2.3 STREET ADDRESS	200 S. Biscayne Blvd. #2750	
2.4 CITY-ST-ZIP	Miami, FL 33131	
3.1 TITLE	Vice President	☐ Change ☒ Addition
3.2 NAME	Brett Berlin	
3.3 STREET ADDRESS	315 Wakefield Ln. North	
3.4 CITY-ST-ZIP	Martinez, GA 30907	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME	200002148202--9	
4.3 STREET ADDRESS	-04/18/97--01105--004	
4.4 CITY-ST-ZIP	****207.75 ****172.75	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS	LFJ 4-15-97	
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 28, 1997 (Date) 706-724-1509 (Daytime Phone #)

CR2E034 (9/96)