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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000042508			
1. Entity Name GLOBALTRON CORPORATION			
Principal Place of Business 45 Broadway, 17th Floor New York, NY 10006		Mailing Address	
2. Principal Place of Business 100 N. Biscayne Blvd. Suite, Apt. #, etc. Suite 2500 City & State Miami, FL Zip 33132 Country USA		3. Mailing Address 100 N. Biscayne Blvd. Suite, Apt. #, etc. Suite 2500 City & State Miami, FL Zip 33132 Country USA	
4. FEI Number 65-0669842		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent Gary Morgan 100 N. Biscayne Blvd. Miami, FL 33132		7. Name and Address of New Registered Agent CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road City Plantation FL Zip Code 33324	
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. CT Corporation System CONNIE BRYAN SIGNATURE <u>Connie Bryan</u> SPECIAL ASSISTANT SECRETARY DATE <u>3/16/01</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)			
9. This corporation is eligible to satisfy its Intangible Tax (filing requirement and elects to do so. (See criteria on back)) ☐		10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP Chairman Morgan, Gary 45 Broadway, 17 Floor New York, NY 10006	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D /CEO/P/S Fitzgerald, Kevin 100 N. Biscayne Blvd., #2500 Miami, FL 33132	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D Pena, Alvaro Davilla 45 Broadway, 17 Floor New York, NY 10006	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D Haller, Frederic Z. 2A Dunstan Rd. London, NW 11 8AA England	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D Fisher, Roman 45 Broadway, 17 Floor New York, NY 10006	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D Soritzer, Michael 37 East Rivo Alto Drive Miami, FL 33139	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D Louis Giordano 739 Crandon Blvd., Apt. PH2 Key Biscayne, FL 33149	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D Sloan, David W. 1585 Broadway New York, NY 10036	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone			

CR2E034 (11/00)