## 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 # P96000044140 (7)

GLOBE INTERNATIONAL INVESTMENTS, INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 27 1998 8:00am Secretary of State



1615 TALISIA COURT LONGWOOD FL 32779		POST OFFICE BOX <b>95</b> 1838 LAKE MARY FL 327 <b>9</b> 5				DO NOT WRITE IN THIS SP	ACE		
						3. Date Incorporated or Qualified	AUE		
						05/23/1996			
2. Principal Pia	ace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-3383337		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.75 Additional Fee Required		
City & State		City & State							
	!	⊢n '				6. Election Campaign Financing  Trust Fund Contribution		D May Be d to Fees	
Zip	Country	<b>28</b> Zip	Соц	ntry		8. This corporation owes or has paid the current			
24	25	29	30	,				□ No	
-4	9, Name and Address of Currer				•	10. Name and Address of New Registered Ag	ent		
AMP	RILAWYER CHARTERED			81	Name				
343 ALMERIA AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)					
	VAL GABLES FL 33134			02	Sileet Add	iress (1.0. box Number is Not Acceptable)			
001	THE CONDECT OF THE CONTRACT OF			83					
				84	City		85 Zip	Code	
				54	Oily	FL	"		
office or re	o the provisions of Sections 607.050 ogistered agent, or both, in the State n familiar with, and accept the oblig	of Florida, Such change was	: authorize	d hv	the corpora	poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoin	nanging niment a	is registered	
SIGNATURE	<del></del>	a and a dealers of the second	DIC Demints	d A	and a standard see	prod where reinstalling) DATE			
12.	Signature, typed or printed name of registered age OFFICERS AN		13.	о мус	an a grianure requ	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTO	PRS IN 12	
TITLE	PSTD	DELETE	1.1 TI	TLE			Change		
NAME	SHIVJI, YVONNE A	<del></del>	1.2 N				-	•	
STREET ADDRESS	1615 TALISIA COURT				ADDRESS				
CITY-ST-ZIP	LONGWOOD FL 32779				I - ZIP				
TITLE	HOW THE STATE OF T	DELETE	2.1 TI			L	Change	Addition	
NAME			2.2 N	AME					
STREET ADDRESS			2.3 \$	REET	ADDRESS				
CITY-ST-ZIP	2.4		2.40	ITY-S	ST-ZIP				
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NAME			3.2 N	AME	į				
STREET ADDRESS			3.3 S	IREET	ADDRESS				
CITY-ST-ZIP			3.4 C	ITY-S	ST-ZIP				
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NAME			4. 2 N	AME					
STREET ADDRESS			4.3 \$	REET	ADDRESS				
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NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	REET	ADDRESS				
CITY-ST-ZIP			5.4 CITY		01-2IP		7.0		
TITLE		☐ DELETE	6.1 TITLE			L	Change	Addition	
NAME			6.2 N	AME	ĺ				
STREET ADDRESS			6.3 S	TREET	ADDRESS				
CITY-ST-ZIP					1- ZIP		· · · · ·		
indicated of officer or o	on this appual report or supplements	al armual report is true and ac eiver or truslee empowered to	ccurate an	ơ tha	at my signati	n Section 119.07(3)(i), Florida Statutes. I further certiure shall have the same legal effect as if made undequired by Chapter 607, Florida Statutes; and that my	er oath; i r name a	that I am an appears in	