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

**FILED** Apr 30 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** P96000045690 (0) GLOBAL LANGUAGE SERVICES, INC. Principal Place of Business Mailing Address 1381 OAKES BLVD. 6017 PINE RIDGE RD NAPLES FL 34119 DO NOT WRITE IN THIS SPACE NAPLES FL 34119 US 3. Date Incorporated or Qualified 05/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3390053 Not Applicable 26 Suite, Apl. #, etc. Suite, Apt. #, etc \$8.75 Additional Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 Yes 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SWANK, STEPHANIE C 1381 OAKES BLVD. Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 33999 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Flegistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 Tille SWANK, STEPHANIE C NAME 1.2 NAME 1381 OAKES BLVD. STREET ADDRESS 13 STREET ADDRESS NAPLES FL 33999 CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Addition TITLE 21 TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE NAME 3 2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-7IP 3.4. CITY - ST- ZIP ☐ DELETE Change Addition TITLE 4 1 TITLE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-SY-ZIP Change DELETE Addition TITLE 5.1 1ITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP

14. Thereby 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 empoweed 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.

6 1 TITLE

62 NAME

63 STREET ADDRESS

DELE1E

TITLE

NAME

STREET ADDRESS

Change

Addition

**CR2E034**