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 # P9600056602 (1)

GLOBE INTERTRADE CO.

Principal Place of Business 6194 WILLOW POINTE CIRCLE ORLANDO FL 32822 Mailing Address

6194 WILLOW POINTE CIRCLE ORLANDO FL 32822

FILED Jan 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

						07/01/1996				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEi Number Applied For				
21	26					65-0677750			Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.	75 Ac	iditional	
22		27				5. Certificate of Status Desired	Fe	e Req	uiréđ	
City & State	•	City & State	<u> </u>			6. Election Campaign Financing	\$5	.00 M	lay Be	
23 28						Trust Fund Contribution	Ad	lded to	Fees	
—, ^{Zip}	Country	Zip	_	intry		8. This corporation owes or has paid the curr		_		
24	25	29	30	,			Yes		No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NEDMEN 11. Sale Name										
	RMEY, JIM J	Name								
6194 WILLOW POINTE CIRCLE					82 Street Address (P.O. Box Number is Not Acceptable)					
ORLANDO FL 32822						<u> </u>				
				83						
				84 (City		85	Zip Co	ode	
				Ш.		FL				
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.										
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE										
	Signature, typed or printed name of registered agen OFFICERS AND			d Agent s	signature require		DIDEC	TOÜC	763.275	
IIILE	PD OFFICERS AND	DELETE	13. 1.1 Ti	TIC	 -	ADDITIONS/CHANGES TO OFFICERS AND	Cha		Addition	
NAME	VERMEY, JIM J	1.2				C Change				
STREET ADDRESS	6194 WILLOW POINTE CIRCLI	=			DOESE					
	ODLANDO EL OCOCO			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP						
CITY-ST-ZIP TITLE	DV				IIF I		Cha	nne	. Addition	
NAME	HEALY, NOLDIE			2.1 TITLE 2.2 NAME			0.10	go		
STREET ADDRESS	6194 WILLOW POINTE CIRCLE	=			ADDECC.					
1	ORLANDO FL 32822			2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP			•			
TITLE	DV DELETE			3.1 TITLE			Chai	onde	Addition	
NAME	ROBLES, GUIDO			3.2 NAME						
	6194 WILLOW POINTE CIRCLE			3.3 STREET ADDRESS						
STREET ADDRESS	ORLANDO FL 32822			3.4, CITY-ST-ZIP					İ	
CITY-ST-ZIP	ORLANDO I L GEOZE				<u> </u>		Cha	700	Addition	
TITLE NAME			4.1 TI 4.2 N				Gild	iigo	C AUGURON	
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STREET ADDRESS			1	TREET AD					İ	
CITY-ST-ZIP		DELETE		TY- <u>ST-Z</u>	IP		Chai		Addition.	
TITLE		T OCCER	5.1 TI				المانات الي	uñe	نان Vanidati:	
NAME			5.2 N							
STREET ADDRESS				TREET AD	ľ				i	
CITY - ST - ZIP		DELETE		TY-ST-Z	IP		Chai	-0.00	Addition	
TITLE		ריו הברבור	6.1 T				ı ∟ııaı	uge	L Audition	
NAME			6.2 N							
STREET ADDRESS			6.3 S	TREET AD	DRESS					
CITY-ST-ZIP		the Abries Office and community of the		TY-ST-Z		Section 440 07(2)(5) [7-14- 0-44-	ATE 1 45-	+ +h - *-		
14. I nereby c indicated	erary mat the information supplied will on this annual report or supplemental	n this illing does not qualify annual report is true and a	y for the ext sccurate an	ərnpuol d that ı	rı stated in : my signatur	Section 119.07(3)(i), Florida Statutes. I further cere shall have the same legal effect as if made uno	ury that Jer oatl	i ine ir n; that	laman	

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 cath; that I am an officer or director of the co-soration 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:

NATUM VERMEY UIRED

1-15-98

407-275-7484