SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

P96000062063 (8)

GLOBAL EXIM, INC.

Principal Place of Business

Malling Address

FILED Jul 15 1998 8:00am Secretary of State



111 EAST BULLARD PARKWAY, UNIT 211 111 EAST BULLARD PARKWAY, UNIT 211 **TAMPA FL 33617** TAMPA FL 33617 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/24/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 15310 AMBERLY DRIVE 15310 AMBERLY DRIVE 59-3392130 26 <u>Applied for</u> Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \mathbf{X} 5. Certificate of Status Desired 230 230 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be TAMPA . FL TAMPA - FL Trust Fund Contribution 23 28 Added to Fees Country Country 8. This corporation owes or has paid the current year intengible Personal Property Tax due June 30. Yes No 33647 33647 USA Yes 25 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name AMERILAWYER CHARTERED 343 ALMERIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 83 84 City Zip Code 85 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.17(TLF) Change Addition SHINDE, SUBRAG PANDA SHINDE, SUBRAO PANDA NAME 1.2 NAME 9120 ROCK ROSE DRIVE 111 EAST BULLARD PARKWAY, UNIT 211 STREET ADDRESS 1.3 STREET ADDRESS TAMPA - FL- 33647 TAMPA FL 33617 CITY-ST-ZIP 1.4 CITY-ST-ZIP VTD TITLE VTD. 2.1 TITLE DELETE X Change Addition AJJARAPU, SUREN KUMAR AJJÁRAPU, SUREN KUMAR NAME 2.2 NAME 9120 ROCK ROSE DRIVE 111 EAST BULLARD PARKWAY, UNIT 211 2.3 STREET ADDRESS STREET ADDRESS TAMPA - FL - 33647 TAMPA FL 33617 CITY-ST-ZIP 2.4 CITY-ST-ZIP DC ST TITLE 3.1 TITLE DELETE Change Addition AJJARAPU, JAWAKI RAM AJJARAPU, JANAKI RAM 3.2 NAME NAME 9120 ROCK ROSE DRIVE 15210 AMBERLY DR APT 1012 STREET ADDRESS 3.3 STREET ADDRESS TAMPA - PL- 33647 tampa fl CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE] DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE DELETE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I 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:

07.06.1998

813-987-2299

CR2E034 (5/98)