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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Morthám

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600063952 (1)

GLOBAL BUSINESS GROUP LIMITED CORPORATION

	- 15" ·			44.19								
Principal Place 6100 TOWN CI SUITE \$30				Mailing Address 5100 TOWN CENTER CIRCLE SUITE 330								
BOCA RATON FL 33486				BOCA RATON FL 33486-1008					3. Date Incorporated or Qualified 3a. Date of Last Report 07/31/1996			
2. Principal P	2a, Mailing Ad	ddress				4. FEI Number XX Applied For						
21			21	26							No	ot Applicable
Suite, Apt.		· · · · · · · · · · · · · · · · · · ·	2	Suite, Apt. #, etc.					5. Certificate of Status Dosired Sa.75 Additional Fee Required			
City & State				City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip Country				Zip Country					This corporation has liability for intangible tax under s. 199 032,			
24	2	16	2	¬ '	ŀ	30	,			Yes [. 100 002,
		nd Address of							10. Name and Address of New Ro	gistered A	gent	AMERICAN CONTRACTOR
E.H.	.G. RESIDEN	T AGENTS, IN	IC.			81	1	Name				
		NTER CIRCLE				82	2	Street Add	ress (P.O. Box Number is Not Accepta	ole)		
SUF	TE 330								The state of the s			
BOO	CA RATON F	L 33486				8;	3					
•						84	4	City		FL	85 Zip (Code
44 Durauant	to the province	no of Soctions 6	07 0502 oo	1 607 1508 Ela	vida Statute	or the above	1	named con	poration submits this statement for the		changing if	ls ragistated
office or r	registered age	of or both, in th	e State of Fl	orida. Such cha	anoc was a	authorized h	ov t	the corpora	tion's board of directors. I hereby acce	pt the appo	ointment as	registered
•	am tamiliar witi	i, and accept th	e obligations	s or, Section 60	17.0505, FIO	orida Statute	es.					
SIGNATURE	Signature, typod o	r printed name of region	stered agent and	tue if applicable	(NO16	: Registered A	genl	l signature requ	ired when reinstating)	DATE		
12.		OFFICE	RS AND DIF			13.			ADDITIONS/CHANGES TO OFF	CERS AND		
TITLE	PD	-		L	DELETE	1.1 TITLE			•		Change] Addition
NAME	GILBER	T, EDWARD	Э Н.			1,2 NAME	E					
STREET ADDRESS	5100 TO	OWN CENTE	ER CIRC	LE, SUIT	E 330	1.3 STREE		Į.				
CITY-ST-ZIP	BOCA R	ATON, FL	33486		DELETE	1.4 CITY -		- ZIP	<u></u>		Change	Addition
TITLE				u	DECETE	2.1 7(1)[8					Change	[_1 woulder
NAME	Ĭ					2.2 NAM8		Post co				
STREET ADDRESS						2.3 STREE 2. 4 CITY						
CITY-ST-ZIP TITLE				П	DELETE	3.1 TITLE	_	-211			Change	Additron
NAME						3.2 NAME						
STREET ADDRESS						3.3 STREE	ET A	DDRESS				
CITY-ST-ZIP						3.4. C(1)	·- \$1	- ZIP				
TITLE					DELETE	4.1 THTLE					Change	Addition
NAME						4. 2 NAM	li:					
STREET ADDRESS						4.3 STREE	EI A	DDRESS				
CITY-ST-ZIP						4.4 CHTY		- ŽIP				
TITLE				LJ	DELETE	5.1 TITLE					Change	L] Addition
NAME						5.2 NAME						
STREET ADDRESS						5.3 \$1RE						
CITY-ST-ZIP	<u> </u>				DELETE	5 4 CITY		-7IP			Change	Add:tion
TITLE				U	DELETE	61 1111					Change	L J Ago:tipil
NAME						6.2 NAME		20.1004.01				
STREET ADDRESS						6.3 STRE		l.				
City-St-ZiP	by certify that	the information:	supplied with	n this filma don	s not qualif	64 CITY- fy for the ex	von	ontion state	d in Section 119.07(3)(i), Florida Statuti	es. I further	certify that	the
informatio	on indicated o	n this annual rep tor of the corpor	port of Sippli ation of the	emental annua	report is tr lee empow	rue and acc ered to exe	cur ecu	ate and tha ite this repo	nt my signature shall have the same leg ort as required by Chapter 607, Florida	al effect as Statutes; ar	if made un nd that my r	ider eath; that name