FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** PROFIT May 11 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 P96000067418 (9) DOCUMENT # **GLOBO COMPUTERS, INC.** Principal Place of Business Mailing Address 13781 SW 161ST TERR 19781 SW 161ST TERR MIAMI FL 33177 MIAMI FL 33177 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 08/12/1996 2a. Mailing Address Applied For 2. Principal Place of Business 65-0687464 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 26 Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. X Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LATORRE, ALBERT 9450 SW 81ST AVE O. Box Number is Not Accept 82 Street Address **MIAMI FL 33156** 83 84 City 11. Pursuant to the provisions of Sections 617,0502 and 607,0508, 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 yes authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with range accept the obligations of Section 607,0505, Plorida Statutes. agent. I am familiar with rand SIGNATURE me of registered agent and title if applicab E: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change TITLE 1.1 TITLE LLIZO, ROLANDO 1.2 NAME NAME **13781 SW 161ST TERRACE** 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33177** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE 21 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change 3.1 TITLE TITLE 32 NAME NAME **3.3 STREET ADDRESS** STREET ADDRESS 3.4. CiTY-ST-ZIP CITY-ST-ZIP DELFTE Change

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 Block 12 or Block 13 if changed, or on an attachment with an address.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

5.4 City-St-ZIP

**63 STREET ADDRESS** 

SIGNATURE:

CITY-ST-200 TITLE

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP TITLE

MAE

NAME

DELETE

DELETE

Change

Addition

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