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 # **P96000074906** (4)

GLOBENET STOCK EXCHANGE, INC.

Principal Place of Business	Mailing Address	
222 W. COMSTOCK AVE. WINTER PARK FL 32789	222 W. COMSTOCK AVE. WINTER PARK FL 32789	

FILED May 01 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

								3. Date Incorporated or Qualified		
								09/10/1996		
2, Principal Place of Business			28.	2a. Mailing Address				4. FEI Number Applied		
21				26					Applicable	
Suite, Apt.	#, elc.		27	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	e			City & State				6. Election Campaign Financing \$5.00 May E	3e	
23			28		-			Trust Fund Contribution	5	
Zip	Country Zip Co				h	Country 8. This corporation owes or has paid the current year Intangible				
24	252930					Personal Property Tax due June 30. Yes No				
		and Address of Curr	ent Regis	tered Agent	—— <u>}</u>			10. Name and Address of New Registered Agent		
	LDS, RAND				8	ויי	Name			
111 NORTH ORANGE AVENUE #2050 ORLANDO FL 32801					6	62 Street Address (P.O. Box Number is Not Acceptable)				
					L.	Office Marious (1, 10, 100) National Marious Pharmacy				
		_			8:	3				
					8	4	City	FL 85 Zip Code		
11. Pursuant t	to the provisi	ons of Sections 607.09	502 and 6	07.1508, Florida Statut	tes, the abo	νe	-named cor	orporation submits this statement for the purpose of changing its regis	stered	
office or re	egistered age	ent, or both, in the Sta	te of Florid	ta. Such change was , Section 607.0505, Fl	authorized t	bγ	the corpora	ration's board of directors. I hereby accept the appointment as registe	ered	
SIGNATURE	Signature, typed	or printed name of registered r	gant and lith	of applicable (NO)	TE: Registered A	ger	n per enutarion	quired when reinstating) DATE		
12.		OFFICERS A	ND DIREC	TORS	13.	_		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2	
TITLE	PCOD			☐ DELETE	1.1 TITLE			☐ Change ☐ A	Addition	
NAME	MAGILL,	LOUIS C			1.2 NAME	E.				
STREET ADDRESS		GBRANCH ROAD			1.3 STRE	ET.	ADDRESS			
City-ST-ZIP		PARK FL 32792			1.4 CITY		•			
TITLE	CCEO			☐ DELETE	2.1 TITLE	_		☐ Change ☐ A	Addition	
NAME		S ROB		•	2.2 NAME	F		•		
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP		PARK FL 32792			2 4 CITY		1			
TITLE	44041	I THAT I E GET DE		DELETE	31 TITLE	_	1-215	☐ Change ☐ A	Addition	
NAME					3.2 NAME					
STREET ADDRESS							ADDRESS			
į.										
CITY-S1-ZIP				DELETE	3.4. CITY	_	,1-ZIP	☐ Change ☐ A	Addition	
TITLE				L. Otter				L. Change L. P	- CONTO	
NAME					4. 2 NAM					
STREET ADDRESS						_	ADDRESS			
CITY-ST-ZIP				Floriere	4.4 CITY-	_	I-ZIP		Latares.	
TITLE				DELETE	5.1 TITLE			☐ Change ☐ A	Addition	
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREE	ET /	ADORESS			
CITY - ST - ZIP					5 4 CITY-	ŞT	T-ZIP			
TITLE				[] DEFELE	6.1 TITLE		ĺ	Change A	Addition	
NAME					6.2 NAME	Ε				
STREET ADDRESS					6.3 STREE	ET /	ADDRESS			
CITY-ST-ZIP					6.4 CITY-	- ST	r-ZIP			
14. I hereby o	ertify that the	information supplied	with this fo	ling does not qualify for	or the exem	pti	tion stated in	in Section 119.07(3)(i), Florida Statutes further certify that the inform	nation	
officer or o	director of the	al report or supplement e corporation or the re changed, or op an at	ceiver or t	rustee empowered to	execute this	na s r	it my signati eport as rec	ature shall have the same legal effect as if made under oath; that I am equired by Chapter 607, Florida Statutes; and that my name appears i	an in	