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FILED  
Mar 18 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000091079 (9)

1. Corporation Name:

GLOBAL FUSION CORPORATION

Principal Place of Business

4057 KIAWA DRIVE  
ORLANDO FL 32837

Mailing Address

4057 KIAWA DRIVE  
ORLANDO FL 32837-5841

2. Principal Place of Business

21 3447 ConchLight DR.  
Suite, Apt. #, etc

22 City & State

23 Kissimmee fl.  
Zip Country

24 34741 25 U.S.

2a. Mailing Address

26 3447 ConchLight DR.  
Suite, Apt. #, etc

27 City & State

28 Kissimmee fl. 34741  
Zip Country

29 34741 30 U.S.

9. Name and Address of Current Registered Agent

GOMEZ, FERNANDO  
4057 KIAWA DRIVE  
ORLANDO FL 32837

3. Date Incorporated or Qualified

11/04/1996

3a. Date of Last Report

None

4. FEI Number 59-3423760

~~607-907-542-0775-9001~~

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐

Yes

☒

No

10. Name and Address of New Registered Agent

81 Name

RON NOUAK

82 Street Address (P.O. Box Number is Not Acceptable)

3447 ConchLight DR.

83

84 City

Kissimmee

FL

85 Zip Code

34741

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

RON NOUAK

Signature (types or prints name of registered agent, and title, if applicable)

(Print Name of Agent or Signature (types or prints name of corporation))

4/10/97

Date

12. OFFICERS AND DIRECTORS

TITLE (P) President / Registered Agent

NAME Fernando Gomez

STREET ADDRESS 4057 KIAWA DR.

CITY-ST-ZIP Orlando fl. 32837

TITLE (T) Treasurer

NAME Kenneth C. Lutz

STREET ADDRESS 710 E. MAGNOLIA ST.

CITY-ST-ZIP Kissimmee fl. 34744

TITLE (VP) Vice President

NAME RON NOUAK

STREET ADDRESS 3447 ConchLight DR.

CITY-ST-ZIP Kissimmee fl. 34741

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE (P) President

2. NAME RON NOUAK

3. STREET ADDRESS 3447 ConchLight DR.

4. CITY-ST-ZIP Kissimmee fl. 34741

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

14. I do 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:

Ron Nouak

4/10/97

407-8518-0105

CR2E034 (9/96)