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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000091820 (6)

GLOBAL OPTIONS INTERNATIONAL TRADING CORP.

FILED Mar 18 1997 8:00am Secretary of State



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Principal Plac	e of Business	Mailing Address				I BUSIN IDINI SIUUS (KKKU 11911 ADII 1001
1229 MERIDIAN	N AVE	1229 MERIDIAN AVE				
SUITE #6 SUITE #6 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139-4457			457			
MIMMI DENOTI	FC 60100	MINMI DENGIT PE GOTOG 4	107		3. Date Incorporated or Qualified 11/07/1996	3a. Date of Last Report
2, Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 1229 Meridian He 26						Not Applicable
Suite, Apt. #, etc. Suite, Apt.			elc.		5. Certificate of Status Desired	\$8.75 Additional
22 Suite 6. 27 City & State City & State						Fee Required
23 100	mi Preach FL.	28 Flood	18 florida.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution	
Zip	Country 2			Country 8. This corporation has liability for intangible tax under s. 199.032,		
24 3313			30		Florida Statutes	
g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
BROOKMYER, GARY 81 Name					Edmond Noder	
3300 PGA BLVD				[82] Street Address (P.O. Box Number is Not A		
SUITE 350 PALM BEACH GARDENS FL 33410			ā		a moribun Anc	16 6
PAL	M BEACH GARDENS FL 334 IU		١		Jami Beach	
			8	4 City		FL 85 Zip Code 3313つ.
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 lapilitat with, and accept the obligations of Soction 607.0505, Florida Statutes.						
$(Y_1, Y_2, Y_3, Y_4, Y_5, Y_5, Y_5, Y_5, Y_5, Y_5, Y_5, Y_5$						
SIGNATURE Signature, typod or printed name of registered agent and bite 4 appricable (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	D	☐ DELETE	1.1 71116			☐ Change ☐ Addition 2
NAME	NADER, EDMOND		1.2 NAM	t		5)
STREET ADDRESS	1229 MERIDIAN AVE SUITE #8		1.3 STRE	ET ADDRESS		[
CITY-ST-ZIP	MIAMI BEACH FL 33139	DECEN	1.4 CITY			
TITLE	D NADED IOCEDIA	DELETE	2.1 1(1LE	\ \ \ \		Change Addition C
NAME	NADER, JOSEPH		2.2 NAM	i		
STREET ADDRESS	1229 MERIDIAN AVE SUITE #6 MIAMI BEACH FL 33139			ET ADDRESS	10 A	
CITY-ST-ZIP	MIAMI DEACH PL 33139	DELETE		-S1-ZIP		Change Addition
TITLE NAME		LJ DEEELC	311111	. 1		Lin Grands [Monton
STREET ADDRESS			3.2 NAM	- 1 . [<u> </u>
\				ET ADDRESS		l
CHTY-ST-ZIP		DELETE	4.1 THLE	-ST-ZIP		Change Addition
NAME		End went it	4. 2 NAM			
STREET ADDRESS				E1 ADDRESS		
CITY-ST-ZIP			4.4 CITY	Į		ł
TITLE		DECETE	5.1 TITLE			Change Addition
NAME			5.2 NAM	E		
STREET ADDRESS				ET ADDRESS		VB 3-18
CITY-ST-ZIP	•		5.4 CITY			
TITLE		DELETE	6.1 TITLE		80000211 -03/19/97010 ***165.00	
NAME			6.2 NAM	τ	######################################	15-516
STREET ADDRESS			6.3 STRÈ	ET ADDRESS	### CC UU	10 .001
CITY-ST-ZIP			6.4 City	-S1-21P	**************************************	

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 offect 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.

2/25/02