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Jan 16 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 # P96000094183 (6)

1. Corporation Name
GLOBE FINANCIAL CORPORATION



Principal Place of Business
774 SANCTUARY COVE DR
NORTH PALM BEACH FL 33410

Mailing Address
774 SANCTUARY COVE DR
NORTH PALM BEACH FL 33410-4521

3. Date Incorporated or Qualified
11/18/1996

3a. Date of Last Report

2. Principal Place of Business

21 12189 VS HGWY 1

22 SUITE #44

23 NORTH PALM BEACH, FL

24 33408

25 PALM BEACH

9. Name and Address of Current Registered Agent

FANTIN, JAMES A
774 SANCTUARY COVE DR
NORTH PALM BEACH FL 33410

2a. Mailing Address

26 12189 VS HGWY 1

27 SUITE #44

28 NORTH PALM BEACH, FL

29 33408

30 USA

4. FEI Number

3b. Date of Last Report
☒ Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$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 JAMES A. FANTIN

82 Street Address (P.O. Box Number is Not Acceptable)
12189 VS HGWY 1 SUITE #44

83

84 City N. PALM BEACH

FL

85 Zip Code 33408

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

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☐ Change ☐ Addition

1.2 NAME JAMES A. FANTIN

1.3 STREET ADDRESS 12189 VS 1 SUITE 44

1.4 CITY-ST-ZIP N PALM BEACH, FL 33408

2.1 TITLE VICE PRESIDENT ☐ Change ☐ Addition

2.2 NAME RICHARD J. CARLAW

2.3 STREET ADDRESS 12189 VS 1 SUITE 44

2.4 CITY-ST-ZIP N PALM BEACH, FL 33408

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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: PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/7/97 561-776-8711

CR2E034 (9/96)