## FILE NOW: FILING FEE AFTER MAY 1'IS \$560.00

PROFIT CORPORATION ANNUAL REPORT



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P960009 9 8 9 0 8 Global ExpORT FINANCE COMPORATION

Principal Place of Business 1150 LOUISIANA AVE. # 50 Mailing Address

SIME

WINTER PARK, FL 32792								<del>,</del> _			
							3. Date l <del>acerporated or</del> Qualified 1/28/97	3a. Date	of Last Report		
2.	Principal Place of Busi	iness	28. Mailing Address			4. FEL Number 59-3420777		Applied For			
21				26			39-3920111 Not Ap				
22	Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required			
23	City & State		City & State	<del> </del>			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees		
24	Zip	Country 25	<i>Σ</i> ιρ <b>29</b>	30	intry		8. This corporation has liability for in Florida Statutes	. · —	ax under s. 199,032, No		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
G. T. BLAND, IV. 2940 DEBROCY WM					81	Name					
					82 Street Address (P.O. Box Number is Not Acceptable)						
					83						
					84	City		FL	85 Zip Code		
11	<ol> <li>Physuant to the provision of the or registered as agent. I am familiar w</li> </ol>	sions of Sections 607.050 gent, or both, in the State vith acqept the oblig	02 and 607.1508, Florida e of Florida. Such change gations of, Section 607.05	Statutos, the a was authorize 05, Florida Sta	bove d by tutes	e-named corporations:	oration submits this statement for the poor's board of directors. I hereby accep	urpose of c I the appoi	hanging its registered otment as registered		

agent. I am familiar with the accept the obligat	it Florida. Such change was a ions of, Section 607.0505, Flo	authorized by the corpora- prida Statutes.	tion's board of directors. I hereby	accept the appointment as	registereci
SIGNATURE Signature typed or project name of registered agent	and tale if applicable (NOTe	Registered Agent signature requi	red when reinstating)	9/3/4/	
	DIRECTORS	13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTOR	RS IN 12
TITLE PC	DELETE	1.1701.6		☐ Change	ncitibbA
NAME G. THOMAS BLANDS TREET ADDRESS 2940 DEBLOY WAY CITY-ST-ZIP WILLREN PALL, KL 3279		1.2 NAME			
STREET ADDRESS 29-60 JOBEON WAY		1.3 STHEET ADDRESS			
CITY-ST-ZIP WINDER PARL, R 3279	72	14 Cily-ST-ZIP			
TITLE	<b>∐</b> DELET <del>E</del>	21 11TLE		☐ Change	Addition
NAME VICTURIA C. FASHIA		2.2 NAME			
STREET ADDRESS 1440 SHAWELL CIRCLE		2.3 STREET ADDRESS			
NAME VICTURIA C. FASALA STREET ADDRESS 1440 SHAGWELL CIRCLE CITY-ST-ZIP HEATHEN, PL 32746	<b>•</b>	2 4 CITY-ST-ZIP			
TITLE V, D	☐ DELETE	3 1 1111.E		Change	Addition
NAME RM C. Raddish STREET ADDRESS 122 M.LL BEANCH Rd.		3.2 NAME -			
STREET ADDRESS 122 M.LL BEANCH Rd.	_	3.3 STREET ADDRESS			
CITY-ST-ZIP TALLAHASSEE FL 3231	<b>7</b>	3 4. CITY - ST - 7/P			
TITLE	☐ DELETE	41 TITLE		☐ Change	Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CHY+S1-ZIP			
TITLE	DELETE	5 1 TITLE		Change	Addition
NAME		5.2 NAM[		11	1 1
STREET ADDRESS		5.3 STREET ADDRESS		7(7)	6/18/0
CITY-S1-ZIP		5.4 CITY - ST - 7IP			1/10/
TITLE	DOLETE	6 1 TITLE	.d. (***)	Change	Add tici
NAME		6 2 NAME	**************************************	22987 <sup>3</sup> 4°° -01002021	
STREET ADDRESS		6.3 STREET ADDRESS	***550.00	OTONE OFT	
OTTY OF TIO		EACITY CT TID	ᠬᠬᠬ᠕᠕᠐᠐		

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 eath; 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 13 if chapted, or on an attachment with an address.

FILED

Sep 18 1997 8:00am

Secretary of State