

2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED

05 MAY 31 AM 10: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000006043 1. Entity Name GLOBAL ONE MARKETING CORPORATION	
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Principal Place of Business 4723 MERCADO DR. SEBRING, FL 33872	Mailing Address 2600 MAITLAND CENTER PKWY STE 330 MAITLAND, FL 32751 US
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2. Principal Place of Business SIEMENSSTR. 7 Suite, Apt. #, etc.	3. Mailing Address SIEMENSSTR. 7 Suite, Apt. #, etc.
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City & State WIESBADEN	City & State WIESBADEN		
Zip 65205	Country GERMANY	Zip 65205	Country GERMANY

05132005 REIN-P CR2E098 (6/04)

6. Name and Address of Current Registered Agent PARKS, LINDA G 2600 MAITLAND CENTER PKWY STE 330 MAITLAND, FL 32751	7. Name and Address of New Registered Agent Name JUSTIN HUGHES, RONALD Street Address (P.O. Box Numbers Not Acceptable) 4723 MERCADO DR. City SEBRING FL Zip Code 33872
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Ronald R. Hughes* **RONALD HUGHES - PSD** DATE: **21 MAY 2005**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HUGHES, RONALD R 4723 MERCADO DRIVE SEBRING, FL 33872	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONAL FEES 05/24/05--01061--002 **550.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	600055192306 05/24/05--01061--002 **300.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *Ronald R. Hughes* (**RONALD R. HUGHES**) DATE: **21 May 2005**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

011-49-6122-702911