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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000030362 (2)

GLOBAL RESEARCH AND STRATEGIES, INC.

## **FILED** Feb 27 1998 8:00am Secretary of State

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Principal Plac	e of Business	Mailing Address		
2724 SEALAR	K LANE	2724 SEALARK LANE		
MILTON PL-3	2563			-0.1/07 Market N. 7/1/0 001/05
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 04/03/1997
2. Principal P	lace of Business	2a. Mailing Address		// 4 FEI Number   Applied For
21 211	9 FLAFLER AL	E 26 2119 F1	ALLER A	1 59-3437308 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	6 41	City & State		6. Election Campaign Financing \$5.00 May Be
23 / 24	WX6T, FL	28 1 Ay WA	GJ F V Country	Trust Fund Contribution Added to Fees
- Bol				This corporation owes or has paid the current year Intangible
24 330	9. Name and Address of Currer	29 33040	30 MONTO	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
		it uedistelet Water	81 Name	10. Name and Address of New Registered Agent
	ERILAWYER CHARTERED -1			GARY K. SCHAFFIER
	3 ALMERIA AVENUE		B2 Street A	ddress (P.O. Box Number is Not Acceptable)
	PRAL GABLES FL 33134		83	1119 FLAGLER AVE
			83	
			84 City	∠ , / 85 Zip Code ,
			` /	Tay Web FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	)2 and 607.1508, Florida Statu > of Florida, Such change was	tes, the above-named o	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	ntions of Section 607.0505, F	lorida Statutes.	in C
SIGNATURE	Signature, typed pyrifined name of registered are			15 14698
			TE Registered Agent signature r	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD CARY	L DELETE	1.1 TITLE	Change Addition
NAME	SCHAFFER, GARY R		1.2 NAME	DILA EN ALLEMA AVE
STREET ADDRESS	-2724 SEALARK-LANE		1.3 STREET ADDRESS	all y Francisco
CITY-ST-ZIP	MILTON PL 32583		1.4 City-St-ZiP	2119 PLALLER AVE Kry WEST, FG. 33040 Change Addition
TITLE	TD	☐ DELETE	2.1 TITLE	Change ☐ Additio
NAME	SCHAFFER, PATRICIA D		2.2 NAME	and the Alling Allin
STREET ADDRESS	2724 SEALARK LANE		2.3 STREET ADDRESS	2119 FLAGLER AVE Kay Wast, FL. 33040
CITY-ST-ZIP	MILTON FL 92503		2.4 CITY-ST-ZIP	MAY WAGT, FL. 33090
11TLE		DELETE	3.1 TITLE	Change Additio
NAME			3.2 NAME	
STREET ADDRESS	ļ		3.3 STREET ADDRESS	
CITY-ST-ZIP		·	3.4. CITY+ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS	}		4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TOLE	Change Additio
NAME			5 2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Additio
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	[		6.4 CiTY-SI-ZIP	
0111-01-24	<u></u>			d in Section 119 07/31(i) Florida Statutas I further certify that the information

Indicated on this annual report or supplied with one similg does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supplied ental annual report is true 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 of 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.