2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF

SIGNATURE

FILED DOCUMENT # **P97000032375** Apr 03, 2000 8:00 am Secretary of State GLOBAL RESOURCE MARKETING, INC. 04-03-2000 90178 050 ***150.00 Mailing Address Principal Place of Business 1408 N KILLIAN DR #202 1406 N KILLIAN DR #202 LAKE PARK FL 33403 STE. #202 LAKE PARK FL 33418-7749 2. Principal Place of Business 3. Mailing Address D. Killian i 1408 N. Killian 14.08 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. # 206 #<u>a06</u> Applied For 4. FEI Number 65-0756685 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33403 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HAMBY, LOUIS L III Street Address (P.O. Box Number is Not Acceptable) 321 ROYAL POINCIANA PLAZA PALM BEACH FL 33480 Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change ☐ Addition ☐ Delete TITLE TITLE WILLIAM J HAZI NAME NAME 1408 N. Killian DRIVE, # 2016 4400 PGA BLVD #717 STREET ADDRESS STREET ADDRESS Lake Park, FL 33403 CITY-ST-ZIP CrTY-ST-ZIP PALM BCH GDNS FL 33410 Addition Change ☐ Delete TITLE TITLE LEANN HAZI NAME 8776 Man-O-War Road STREET ADDRESS 4400 PGA BLVD #717 STREET ADDRESS Palm Beach Coardens, FL 33418 CITY-ST-ZIP CITY-ST-ZIP PALM BCH GDNS FL 33410 Addition ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if