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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # **P97000033808**

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

Feb 25, 1999 8:00 am Secretary of State **Katherine Harris** Secretary of State

02-25-1999 90016 016 ***158.75

GLOBAL	REALTY GROUP, INC.				
Principal Place	e of Business	Mailing Address		, , , , , , , , , , , , , , , , , , , ,	
3001 SANTEE PLACE P.O. BOX 161244			71C-1944		
JACKSONVILLE FL 32259 ALTAMONTE SPRINGS FL 327			110-1244	DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualifed 04/14/1997	
a Drinning D	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	lace of Business	H DA D TCA	539	59-3448774	Not Applicable
Suite, Apt. #, etc.		26 FO Box 550 Suite, Apt. #, etc.	001		\$8.75 Additional
22.		27		5. Certifcate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 Jacksonuil	le FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	Intangible
24	25	29 32255-053130	o Dival	Personal Property Tax.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
11477	UAWAY DICHADD C		81 Name		
	HAWAY, RICHARD G	100 4950	82 Street Add	dress (P.O. Box Number is Not Acceptable)	
10151 DEERWOOD PARK BLVD BLDG 100, #250 JACKSONVILLE FL 32256					
JACI	SUNVILLE PL 32236		83		
			84 City		85 Zip Code
				<u> </u>	<u>L</u>
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligations.	if Florida. Such change was auth	orized by the corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	ointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Re	egistered Agent signature requir	ed when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1,1 TITLE	D. 55	☑ Change ☐ Addition
NAME	MCCUE, EDWARD R JR		12 NAME &	aware & mc Cue Ja	
STREET ADDRESS	D O DOW 404044 MILE		1.3 STREET ADDRESS	Box 550539 N/A	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 3271	6-1244	1.4 CITY+ST-ZIP	Jacksonville, FL 32255	·053 <u>9 </u>
TITLE		☐ DELETE	2.1 TITLE	,	Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	•	
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			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		□ BELETE	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		Containe Chandings
NAME			5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
T:TLE		□ NETE (E	6.2 NAME		
NAME			6.3 STREET ADDRESS		
STREET ADDRESS					1
CITY-ST-ZIP		41 CF - 1 - 1/2 F - 1	6.4 CITY-ST-ZIP	Section 119 07(3)(i) Florida Statutes I further of	and the information

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 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, with all other like empowered.

SIGNATURE: