Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90071 014 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000040853

1. Corporation Name

GLOBAL	. Pathways, Inc.						
Principal Plac	e of Business	Mailing Ad	dress				f 100/1004 tre (04t) (04t) 88til eaftil eatil eatil eatil eatil eatil eatil eatil 18til eatil 18til
12785 SW 64 (COURT	12785 SW (64 COURT				
MIAMI FL 3315	6		AIAMI FL 33156				DO NOT WOITE IN THE OFFICE
US		บร					DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified 05/08/1997
2. Principal P	lace of Business	2a. Mailing	Address				4. FEI Number Applied For
21 26			1				65-0751205 Not Applicable
Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27					5. Certificate of States Desired Fee Required
City & Stat	te	City &	State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	Country	Zip	-	Cou	intry		8. This corporation owes the current year Intangible
24	25	29		30			Personal Property Tax. Yes No
	9. Name and Address of Curre	nt Registered A	gent		L.,		10. Name and Address of New Registered Agent
	DD, DARDEN			,	81	Name	, , ,
1278	12785 SW 64 COURT					Street A	address (P.O. Box Number is Not Acceptable)
MIAI	MI FL 33156				83		
	•				84	City	Fi 85 Zip Code
office or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such ations of, Section	change was au 607.0505, Flori	thorized da Stat	d by t utes.	the corpo	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered age				1 Agent	t signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PSTD OFFICERS AI	ND DIRECTORS	DELETE	13.			PRESIDENT Change PAddition
TITLE	• • •		□ DECE IE		1.1 TITLE		PILESIBE NI
NAME	HOOD, DARDEN G			1.2 NAME			TERESA A. HOOD 12785 SW 64 CT
STREET ADDRESS				1.3 STREET		ADDRESS	12785 80 01 01
CfTY-ST-ZIP	MIAMI FL 33156			_	ΠΥ-S <u>T</u> -	-ZIP	MIAMI, FI 33/66
TITLE			☐ DELETE	2.1 TI	TLE		SECRETARY TREASURER Thange Addition
NAME				2.2 N	AME		DARDEN G. HOOD
STREET ADDRESS		-		2.3 \$	TREET	ADDRESS	12785 SW 64 CT
CITY-ST-ZIP				2.40	TY-ST	T-ZIP	MIAMI F1 33156
TITLE			☐ DELETE	3.1 TI	TLE		Change Addition
NAME				3.2 N	AME		
STREET ADDRESS				3.3 \$	TREET	ADDRESS	
CITY-ST-ZIP	{			3,4,0	ITY-ST	T-ZIP	
TITLE		, , , , , , , , , , , , , , , , , , , 	DELETE	4.1 TI			Change Addition
NAME				4. 2 N			
STREET ADDRESS						ADDRESS	
					ITY-ST-		
CITY-ST-ZIP			DELETE	5.1 T		-24	☐ Change ☐ Addition
HILL				V			U

CITY-ST-ZIP 14. 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.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY+ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Change

☐ Addition