

Due Date: 05/01/93 Amount Due: \$200.00 If After Due Date: \$225.00

FILED
Apr 14 1998 8:00am
Secretary of State

CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation: DOCUMENT # R97000057786

GLOBAL MANAGEMENT SYSTEMS, INC.
1287 E. Newport Center Drive
Suite 209
Deerfield Beach, Florida 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/01/97 3a. Date of Last Report

4. FEI Number 65-0771562 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$138.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2.

FILING FEE \$200.00 ANNUAL REPORT \$81.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

2. Mailing Address 2a. Principle Place of Business

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Peter G. Gruber, P.A.
9100 South Dadeland Boulevard
One Dattran Center, Suite 910
Miami, Florida 33156

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code 86 Country

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) DATE

12. OFFICERS AND DIRECTORS 13. OFFICERS AND DIRECTORS CHANGES

1.1 TITLE 1.2 NAME 1.3 ADDRESS 1.4 CITY - ST - ZIP	P/S/D Kenneth Lambert 1287 E. Newport Ctr. Dr. #209 Deerfield Beach, FL 33442	1.1 TITLE 1.2 NAME 1.3 ADDRESS 1.4 CITY - ST - ZIP	
2.1 TITLE 2.2 NAME 2.3 ADDRESS 2.4 CITY - ST - ZIP		2.1 TITLE 2.2 NAME 2.3 ADDRESS 2.4 CITY - ST - ZIP	
3.1 TITLE 3.2 NAME 3.3 ADDRESS 3.4 CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 ADDRESS 3.4 CITY - ST - ZIP	
4.1 TITLE 4.2 NAME 4.3 ADDRESS 4.4 CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 ADDRESS 4.4 CITY - ST - ZIP	
5.1 TITLE 5.2 NAME 5.3 ADDRESS 5.4 CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 ADDRESS 5.4 CITY - ST - ZIP	
6.1 TITLE 6.2 NAME 6.3 ADDRESS 6.4 CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 ADDRESS 6.4 CITY - ST - ZIP	900002488729 -04/15/98--01004--012 ***150.00

14. I 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. I further certify 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 or Chapter 617, Florida Statutes, and that my name appears in Block 12, Block 13 if a change in an attachment with an address.

SIGNATURE DATE

Print/Type Name of Signing Officer or Director Kenneth Lambert Title(s) President Daytime Telephone Number