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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 24, 1999 8:00 am Secretary of State

05-24-1999 90026 003 ***158.75

1999 P97000073548 **DOCUMENT #** 1. Corporation Name

	COMMTE e of Business	C GLOB	AL	SERV	ices,	INC.			
Principal Place	e of Business	Mailing Address							
107	78 DALMANYIIIA	y 🤛 S	AME	-					
10778 DALMANYWAY & SAME ROYAL PALM BEACH, FL						DO NOT WO	TC IN TUIC	CDACE	
107AL FACT WALLET					3 Data I	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
33	411				3. Date 1	8/21/97			
2 Dringing D	tions of Programs	2a. Mailing Address			4. FEI N	01			plied For
	lace of Business	_ ~			4. / 1. / 2	5-07759	719	- 	ot Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				, <u>, , , , , , , , , , , , , , , , , , ,</u>			Additional
22	, o.e.	27			5. Certifo	ate of Status Desired	Ŕ.	•	equired
City & Stat	ie	City & State			6. Flection	n Campaign Financing		\$5.00	May Be
23	-	28			1	Fund Contribution			to Fees
Zip	Country	Zip	Cou	intry	8. This c	orporation owes the curr	ent year Int	angible	
24	25	29	30		Person	nal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name	and Address of New I	Registered	Agent	
	1 = ==	CIER		81 Name					
	RANDALL EF			82 Street	Address (P.O. Bo	Number is Not Accepta	able)		
'	10778 DALMAI	TAW YN			(
•	ROYAL PALM BE	a.H FL		83					
	RUYAL PALM SIE			84 City				85 Zip	Code
							FL		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida S	tatutes, the a	bove-named	corporation subm	ts this statement for the	purpose of	changing its	registered
office or n	registered agent, or both, in the State of m familiar with, and accept the obligation	r Florida. Such change w ons of Section 607.0505	as aumonze , Florida Stat	utes.	oration's board of	ullectors. Thereby accep	pt the appoi	intinent as re	gistered
SIGNATURE	Shanlack R Es	116-							
SIGNATURE									
	Signature, typed or printed name of registered agent		NOTE: Registered	Agent signature i	equired when reinstating		DATE		
12.	OFFICERS AND	DIRECTORS	13.			ONS/CHANGES TO OF			
12. TITLE	OFFICERS AND	DIRECTORS	13.					ID DIRECTO	DRS IN 12
	PRESIDENT SELACTA EFFLER RANALL A	DIRECTORS MUT TAGA. DELETI	13.						
TITLE	PRESIDENT, SELACTA EFFLER, RAHALL A 10778 DALMANY W	DIRECTORS MUY TARA. DELETI L.	13. E 1.1 Ti 1.2 N	m.e.					
TITLE NAME	PRESIDENT SELACTA EFFLER RANALL A	D DIRECTORS MAY TABA. DELETI AT FL 33411	13. E 1.1 T 1.2 N 1.3 S 1.4 C	ITLE AME TREET ADORESS ITY-ST-ZIP	ADDITI	ONS/CHANGES TO OF	FICERS AN	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS	PRESIDENT, SELACTA EFFLER, RAHALL A 10778 DALMANY W	DIRECTORS MUY TARA. DELETI L.	13. E 1.1 T 1.2 N 1.3 S 1.4 C	ITLE AME TREET ADORESS ITY-ST-ZIP	ADDITI	ONS/CHANGES TO OF	FICERS AN		
TITLE NAME STREET ADDRESS CITY- ST-ZIP	PRESIDENT, SELACTA EFFLER, RAHALL A 10778 DALMANY W	D DIRECTORS MAY TABA. DELETI AT FL 33411	13. E 1.1 T 1.2 N 1.3 S 1.4 C	ITLE AME TREET ADORESS ITY-ST-ZIP ITLE	ADDITI	ONS/CHANGES TO OF	FICERS AN	☐ Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PRESIDENT, SELACTA EFFLER, RAHALL A 10778 DALMANY W	D DIRECTORS MUT TABA. DELETI AT DELETI DELETI	13. E 1.1 T 1.2 N 1.3 S 1.4 C E 2.1 T 2.2 N 2.3 S 2.4 C	ITLE AME TREET ADORESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP	ADDITI	ONS/CHANGES TO OF	FICERS AN	☐ Change ☐ Change	☐ Addition
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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.

SIGNATURE:

KANDALL R. EFFLER

Daytime Phone #