

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

**FILED**  
**Apr 23, 1999 8:00 am**  
**Secretary of State**

04-23-1999 90116 014 \*\*\*158.75

DOCUMENT # P97000102211

1. Corporation Name

GLOBAL POWER, LIGHT AND WATER COMPANY, INC.



Principal Place of Business

Mailing Address

19811 EMMETT ROAD  
PH  
SANTA CLARITA CA 91351

4611 SOUTH UNIVERSITY DRIVE  
SUITE 201  
DAVIE FL 33328

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/01/1997

4. FEI Number

91-1883783

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

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

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

FEUER, JEFFREY P  
4611 SOUTH UNIVERSITY DRIVE  
STE. 201  
FT. LAUDERDALE FL 33328

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE PD  
NAME GIORDANO, ALDO  
STREET ADDRESS 19811 EMMETT ROAD  
CITY-ST-ZIP SANTA CLARITA CA 91351

TITLE STD  
NAME VINALES, THERESA  
STREET ADDRESS 19811 EMMETT ROAD  
CITY-ST-ZIP SANTA CLARITA CA 91351

TITLE VPD  
NAME FRANKLIN, ROBERT S ESQ.  
STREET ADDRESS 21 OLD ORCHID ROAD  
CITY-ST-ZIP RYE ROCK NY 10573

TITLE VPD  
NAME MAVKULOV, IGOR  
STREET ADDRESS C/O D. AGUSTINE 1777 REITSTOWN ROAD  
CITY-ST-ZIP BALTIMORE MD 21208

TITLE VPD  
NAME FEUER, JEFFREY P  
STREET ADDRESS 3644 EAST FORGE ROAD  
CITY-ST-ZIP DAVIE FL 33328

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☒ Change ☐ Addition  
VPD  
IGOR MARKULOV  
C/O EMMA LEBEDEV 6207 REISTERTOWN ROAD  
BALTIMORE MD 21215

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, on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 12, 1999 (954) 292-7965  
Date Daytime Phone #

CR2F034 (11/98)