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

5801 BISCAYNE BLVD.

MIAM! FL 33137

May 05, 1999 8:00 am Secretary of State 05-05-1999 90069 025 ***150.00

DOCUMENT # P9800009409

1. Corporation Name

5801 BISCAYNE BLVD.

MIAMI FL 33137

GLOBAL CAPITAL CORP.	
Principal Place of Business	Mailing Address
% R. INFELD & ASSOC	% R. INFELD & ASSOC

FILED

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

01/29/1998

					0 1,000,000				
2. Principal Pl	lace of Business みんい 35 th ST	2a. Mailing Address			4. FEI Number	5470			Applicable
Suite, Apt.				5. Certificate of Status Desired \$8.75 Addition.					
22		27			5. Certificate of Sta	alus Desired	J 	Fee Rec	uired
City & State	ity & State City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip a a d	Country Zip Country				8. This corporation	n owes the current	_		_
24 001	25	29	30		Personal Prope				□No
	9. Name and Address of Curren	t Registered Agent			10. Name and Add	ress of New Reg	istered Ag	jent	
FILINGS, INC.				81 Name ILYA PALINSKY					
				82 Street Address (P.O. Box Number is Not Acceptable)					
	3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132			83 70 0 0 0 0 7 0 0					
F1. 1	LAUDENDALE PE 300 114 102		83	83 2812 NW 35 ST					
			84		Ami		FL		149
11. Pursuant i office or re agent, I as	to the provisions of Sections 607.050; egistered agent, or both, in the State m familiar with and accept the obligat	2 and 607.1508, Florida Statutes of Florida. Such change was autions of, Section 607.0505, Flori	s, the above thorized by da Statutes	e-named corporation	oration submits this standard of directors.	. I nereby accept in	ie appointr	nent as reg	istered
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 withy and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pright name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CH/	ANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 TITLE		SIMON	GARA	SER	Change	☐ Addition
NAME	Palinsky, iłya		1.2 NAME		- (giz Nu	135	S	
STREET ADDRESS	1.3 ST		1.3 STREET	ADDRESS	SIMON GARBER Change Add SIMON GARBER Change Add SBO 2812 NW 3555 MIAMIFT 33142				12
CITY-ST-ZIP	MIAMI FL 33137		1.4 CITY-S	T- ZIP		14/MAI			
TITLE		☐ DELETE	2.1 TITLE				Į.	Change	Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET	ADDRESS					
CITY-ST-ZIP			2.4 CITY-\$	T-ZIP				Change	Addition
TITULE (☐ DELETE	3.1 TITLE				L	Change	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET						
CITY-ST-ZIP		☐ DELETE	3.4. CFTY-S	T-ZIP				Change	Addition
TITLE			4.1 HILE 4.2 NAME				ı		
NAME			4. 2 NAME 4.3 STREET	AUDDESS					
STREET ADDRESS									
CITY-ST-ZIP		☐ DELETE	4.4 CITY-S	1-217				Change	Addition
NAME			5.2 NAME				•		
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY-S	T-Z1P					
TITLE		☐ DELETE	6.1 TITLE				[Change	☐ Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY OF ZID			64 CITY-S	T-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 recover 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 areachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

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