

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 16, 1999 8:00 am
Secretary of State

09-16-1999 90014 012 ***550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000016293

1. Corporation Name

GLOBAL NET SOLUTIONS, INC.



Principal Place of Business

Mailing Address

**1509 SOUTH ANDREWS AVENUE
SECOND FLOOR
FT. LAUDERDALE FL 33316**

**1509 SOUTH ANDREWS AVENUE
SECOND FLOOR
FT. LAUDERDALE FL 33316**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/19/1998

4. FEI Number

650838893

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.

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 633 SW 4TH AVENUE

26 633 SW 4TH AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #2

27 #2

City & State

City & State

23 FT. LAUDERDALE, FL

28 FT. LAUDERDALE FL

Zip

Country

Zip

Country

24 33315

25 US

29 33315

30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SEIDMAN, NATHANIEL
1509 SOUTH ANDREWS AVENUE
SECOND FLOOR
FT. LAUDERDALE FL 33316**

81 Name

NATHANIEL SEIDMAN

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

633 SW 4TH AVE, #2

83

FT. LAUDERDALE

84 City

FT. LAUDERDALE FL

85 Zip Code

33315

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]

NATHANIEL SEIDMAN V.P. 9-8-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**PD
NAME RICHMAN, MARK
STREET ADDRESS 1509 SOUTH ANDREWS AVENUE
CITY-ST-ZIP FT. LAUDERDALE FL 33316**

1.1 TITLE ☒ Change ☐ Addition

**1.2 NAME MARK RICHMAN
1.3 STREET ADDRESS 633 SW 4TH AVE #2
1.4 CITY-ST-ZIP FT. LAUDERDALE FL 33315**

TITLE ☐ DELETE

**VPD
NAME SEIDMAN, NATHANIEL
STREET ADDRESS 1509 SOUTH ANDREWS AVENUE
CITY-ST-ZIP FT. LAUDERDALE FL 33316**

2.1 TITLE ☒ Change ☐ Addition

**2.2 NAME NATHANIEL SEIDMAN
2.3 STREET ADDRESS 633 SW 4TH AVENUE #2
2.4 CITY-ST-ZIP FT. LAUDERDALE FL 33315**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

3.1 TITLE ☐ Change ☐ Addition

**3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

4.1 TITLE ☐ Change ☐ Addition

**4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

5.1 TITLE ☐ Change ☐ Addition

**5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

6.1 TITLE ☐ Change ☐ Addition

**6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:

[Signature]

9-8-99

(954)-467-8352

CR2E034 (5/99)