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PROFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90115 015 \*\*\*150.00

DOCUMENT # P98000020621  1. Corporation Name GLOBAL GOLF WORKS, INC.					
Principal Place	of Business	Mailing Address	<del></del>		TYANY MÄNYIN ATYIN TYANI LYAN INDI
430 46TH COUR		430 46TH COURT		·	
VERO BEACH FL 32968 VERO BEACH FL 32968					
10.0		•		DO NOT WRITE IN THIS	SPACE
ļ				3. Date Incorporated or Qualifed	1
L		<del>,</del>		03/04/1998	1 1 2 2 2 2 2 2
_	lace of Business	2a. Mailing Address		A. Fernumber 27-102	Applied For Not Applicable
21		26		100 Cos. 100	\$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
22 City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Int	angible
24	25		0	Personal Property Tax.	¥ZYes □No
<del></del>	9. Name and Address of Currer	it Registered Agent		10. Name and Address of New Registered	Agent
			81 Name		
LAUER, E. STEVEN			82 Street Add	iress (P.O. Box Number is Not Acceptable)	
3426 OCEAN DRIVE VERO BEACH FL 32963					
VEAL	O DEACH FE 32903		83		
ļ			84 City	FL	85 Zip Code
		n - 1 503 1500 El - 14- Ct - 14-		assign authorite this essentiate the currence of	changing its registered
	to the provisions of Sections 607.050 egistered agent, or both, in the State mylamiliar with, and accept the obligations are continuous control of the policy of the provisions			ion's board of directors, I hereby accept the appoin	niment as registered
SIGNATURE	V Quil & Bush				í
		AMOTE E		and waves reconstrations) DATE	<u></u>
12	Signature, typed or printed name of registered age		egistered Agent signature require	nd when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
12.	OFFICERS AN	in and tide if applicable. (NOTE: FID DIRECTORS	egistered Agent signature require 13. 1,1 TITLE		#D DIRECTORS IN 12
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(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 cath; 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:

CHATURE AND TYPED OF PRINTED NAME OF BUSHING OFFICER OR DIRECTOR

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