## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

04-02-1999 90091 006 \*\*\*150.00

City & State

23

24

Zip

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

## 1999 DOCUMENT # P98000044775 1. Corporation Name GLOBAL ENVIRONMENTAL TECHNOLOGIES, INC. Principal Place of Business Mailing Address 7578 NORTHWEST 59TH WAY 7578 NORTHWEST 59TH WAY PARKLAND FL 33067 PARKLAND FL 33067 2a. Mailing Address 2. Principal Place of Business 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 22

28

29

Country

9. Name and Address of Current Registered Agent

Zip

City & State

SHERIDAN, J D Street Address (P.O. Box Number is Not Acceptable) 82 7578 NORTHWEST 59TH WAY PARKLAND FL 33067 83 85 Zip Code 84 City

Country

30

FILED Apr 02, 1999 8:00 am Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

Trust Fund Contribution

Personal Property Tax.

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Name and Address of New Registered Agent

05/18/1998 4. FEI Number

		L i		
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 r	equired when reinstating) DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	RS IN 12
TILE	D DELETE	1.1 TITLE	☐ Change	☐ Addition
IAME	SHERIDAN, J D	1.2 NAME		
STREET ADDRESS	TETO MODELSHIEST FORM WAY	1.3 STREET ADDRESS	_	
CITY-ST-ZIP	PARKLAND FL 33067	1.4 CITY-ST-ZIP		
ITLE	DELETE	2.1 TITLE	☐ Change	Addition
AME		2.2 NAME		
		2.3 STREET ADDRESS		
STREET ADDRESS		2. 4 CITY-ST-ZIP		
CITY-ST-ZIP	☐ DELETE	3.1 TITLE	Change	Addition
TITLE				_
NAME		3.2 NAME		
STREET ADDRESS	معاورة وماده ستشميم محتبها المهداني التحاليا الدارات	3.3 STREET ADDRESS	,	
CITY-ST-ZIP		3.4. CITY-ST-ZIP		T A LEE
TTLE	☐ DELETE	4.1 TITLE	☐ Change	Addition
LAME .		4. 2 NAME		
TREET ADDRESS		4.3 STREET ADDRESS		
OTTV CT 78D		4.4 CITY-ST-7/P		

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 chapted, or on an attachment with an address, with an other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

63 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

DELETE

DELETE

SIGNATURE

Change

☐ Change

Addition

Addition