

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000047109

1. Entity Name

GLOBAL POWER, INC.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90203 006 ***150.00

Principal Place of Business

Mailing Address

12230 FOREST HILL BLVD.
SUITE 121
WELLINGTON FL 33414

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SUITE 121
WELLINGTON FL 33414-5799

2. Principal Place of Business

3. Mailing Address

12230 Forest Hill Blvd.

Suite, Apt. #, etc.

Suite 121

City & State

Wellington FL

Zip

33414

Country

Palm Beach

Country

4. FEI Number

65-0838797

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LIZCANO, GERARDO
4693 CARLTON GULF DRIVE
LAKE WORTH FL 33467

Name

Gerardo Lizcano

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

4693 Carlton

GOLF DRV.

City

Lake Worth

FL

Zip Code

33467

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Gerardo J. Lizcano

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

(NOTE: Registered Agent signature required when reinstating)

02/26/00

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS LIZCANO, GERARDO J
CITY-ST-ZIP 12230 FOREST HILL BLVD.
WELLINGTON FL 33414

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS PERDOMO, CARLOS
CITY-ST-ZIP 12230 FOREST HILL BLVD.
WELLINGTON FL 33414

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gerardo J. Lizcano

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/00

Date

(561) 227-1589

Daytime Phone #

CR2E034 (9/99)