

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 04, 2001 8:00 am**  
**Secretary of State**

06-04-2001 90016 022 \*\*\*158.75

**DOCUMENT #** P98000047355

1. Entity Name

Global Discoveries Incorporated

Principal Place of Business

Mailing Address

5728 Major Blvd. #256  
 Orlando, FL 32819

P.O. Box 691239  
 Orlando, FL 32869

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3518131

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Pacheco, Oscar  
 209 Farrington Lane  
 Kissimmee, FL 34744

7. Name and Address of New Registered Agent

Name

Pacheco, Debbie A.

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

209 Farrington Lane

City

Kissimmee,

FL

Zip Code

34744

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

*Debbie A. Pacheco*

4-27-01

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

(NOTE)

Registered Agent signature required when reinstating.

DATE

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

**FILE NOW!!**

**After MAY 1, 2001**  
**Make Check Payable**

**FEE IS \$150.00**

**Fee will be \$550.00**  
**to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS	N/A	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS	N/A	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS	N/A	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS	N/A	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS	N/A	
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D/P/C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Pacheco, Debbie A.	
STREET ADDRESS	209 Farrington Lane	
CITY-ST-ZIP	Kissimmee, FL 34744	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pacheco, Oscar	
STREET ADDRESS	209 Farrington Lane	
CITY-ST-ZIP	Kissimmee, FL 34744	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	N/A	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	N/A	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	N/A	
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 I am an officer or director of the corporation or the receiver or trustee empowered to execute this report or changed, or on an attachment with an address, with another like empowered.

signature shall have the same legal effect as if made under oath; that I am an officer or director required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

*Debbie A. Pacheco*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Date

Daytime Phone #

4-27-01

407-226-1088

CR2E034 (11/00)