


FILED
Feb 29, 2008 8:00 am
Secretary of State

02-29-2008 90028 018 ***150.00

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000061858 1. Entity Name GLOBE CONSULTING & MANAGEMENT, INC.	
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Principal Place of Business 4427 SE 16TH PLACE #2 2735 SANTA BARBARA BLVD. CAPE CORAL, FL 33904 33914	Mailing Address C/O L&M ACCOUNTING, INC. 2804 DEL PRADO BLVD., #209 CAPE CORAL, FL 33904 33909
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01252008 No Chg-P CR2E034 (11/05)

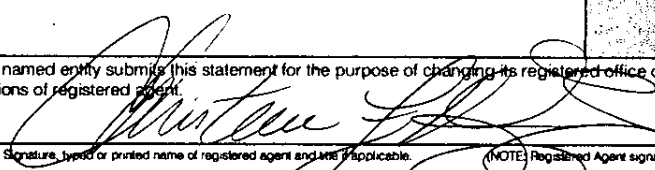
DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0854447	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WRIGHT & SHAW, CHRISTINE F WRIGHT
4427 SE 16TH PLACE #2 2735 SANTA BARBARA BLVD
CAPE CORAL, FL 33904 33914
suite 201

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE 2/26/08

Signature, typed or printed name of registered agent and office, if applicable. (NOTE) Registered Agent signature required when reinstating.

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KUEHR, DAGMAR BOHNSDORFER WEG 45A 12524 BERLIN, GERMANY,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GOLLIN, GERHARD WINCKELMANNSTR 27, 12487 BERLIN GERMANY,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  PRESIDENT KUEHR 02/21/08 00491714221950

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #