**PROFIT** CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90120 029 \*\*\*150.00

1. Corporation	MEN 1 # P98000 AL GLOBE-USA, INC.	077563							
Principal Place	of Business	Mailing Address	-		I SERVARI IN ISTORI IRIN ERM	# H213 WHITE E B217	16610 19441 E1110	E1188 1195 1481	
5209 NW 74 AV MIAMI FL 33:66		5209 NW 74 AVE, STE. 2 MIAMI FL 33166			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualife				1
					09/08/1998				
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Apı	pl ed For	1
21		25			65-087567	1	No	t /Applicable	
Suite, A; t.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A		
City & State	e .	City & State			6. Election Campaign Financing	<del></del>	\$5.00	May Bo	.]
23	_	28			Trust Fund Contribution	" []	Added to	o Fees	1
Zip	Country 25	Zip 29	Coun	try	This corporation owes the cu     Personal Property Tax.	rrent year In		[]No	
	9. Name and Address of Current				10. Name and Address of New	Registered	Agent		4
				81 Name					
BOULLON, LUIS D			-	82 Street Ad	Iress (P.O. Box Number is Not Accep	table)			1
5209 NW 74 AVE, STE. 217 MIAMI FL 33166			ļ	na					┥
HANT-AN	411 FE 33100			83					]
				84 City		FL	85 Zip 0		
11. Pursuant office of re	to the provisions of Sections 807,0502 egistered agent, or both, in the State on familiar with, and accept the obligat	and 607.1508, Florida Statu Florida, Such change was a	iles, the ab	ove-named co by the corpora	poration submit: this statement for the tion's board of directors, I hereby acc	e purpose of ept the app x	changing its intment as rec	registered gistered	
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ŗ									
SIGNATUR =	Signifium, typed or printed new is of registered agent	and title of applicable (NOT)			red when reinstating)	DATE			   g
SIGNATUR =	Signishure, typed or printed new or registered agent OFFICERS AND	and title of applicable (NOT	i : Registered A	igent signature requ		DATE	ND DIRECTO	FS IN 12	1408)
SIGNATURE	Signifure, typed or printed new or registered agent OFFICERS AND	end title of explicable (NOT DIRECTORS	13.	gent signature requ	red when reinstating)	DATE			4 (11/08)
SIGNATURE  12.  TITLE  NAME	Significate, typed or printed new 4 of registered agent OFFICERS AND OP HERNANDEZ-CABALLERO, SE	und the of applicable (NOT DIRECTORS DELETE RAFIN	1 : Registered A 13. 1.1 TITU 12 NAA	igent signature requ E	red when reinstating)	DATE	ND DIRECTO	FS IN 12	034 (11/08)
SIGNATURE 12.	Signification, typed or printed new 4 of registered agent OFFICERS AND OP HERNANDEZ-CABALLERO, SEI CALLE SANTA MARIA NO. 205-	und the of sophicable (NOT DIRECTORS DELETE RAFIN 208, QUINTA	1 : Registered # 13. 1.1 TITU 12 NAA 1.3 STR	E AE LEET ADDRESS	red when reinstating)	DATE	ND DIRECTO	FS IN 12	22E034 (11/98)
SIGNATURE  12.  TITLE  NAME  STREET ADDRE'S  CITY-ST-ZIP	DP HERNANDEZ-CABALLERO, SEI CALLE SANTA MARIA NO. 205- GLOBE, EL BOSQUE, CARACA:	und the of separable (NOT DIRECTORS DELETE RAFIN 208, QUINTA S,VZ	1 : Registered A 13. 1.1 TITU 12 NAA 1.3 STR 1.4 CIT	E AE BET ADDRESS 7-ST-ZP	red when reinstating)	DATE	ND DIRECTO	FS IN 12	CROEDA (11/08)
SIGNATUR E  12.  TITLE  NAME  STREET ADDRE:S  CITY-ST-ZIP  TITLE	DP HERNANDEZ-CABALLERO, SEI CALLE SANTA MARIA NO. 205- GLOBE, EL BOSQUE, CARACA	und the of sophicable (NOT DIRECTORS DELETE RAFIN 208, QUINTA	13. 13. 1.1 TITL 12 NAA 1.3 STR 1.4 CIT 2.1 TITL	E AE BET ADDRESS Y-ST-ZIP E	red when reinstating)	DATE	ND DIRECTO	RS IN 12	CR2E034 (11/98)
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14. Hereby certify that the information supplied with this filing does not qualify fir the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicatured 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 or derivative that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as recuired 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:

G OFFICE! OR ORECTOR

(LUIS D. BOULLON)

04-21-99 (305) 594-0690 Daytime Phone #