

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 04, 2002 8:00 am**  
**Secretary of State**

08-04-2002 90157 036 \*\*\*158.75

**DOCUMENT # P99000065837**

1. Entity Name  
**GLOBAL ASSET INVESTMENTS, INC.**

Principal Place of Business

301 YAMATO RD., STE 3110  
 BOCA RATON FL 33431

Mailing Address

301 YAMATO RD., STE 3110  
 BOCA RATON FL 33431

00100000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**2160 W. Atlantic Ave.**

3. Mailing Address

**2160 W. Atlantic Ave**

Suite, Apt. #, etc.  
**2nd Floor**

Suite, Apt. #, etc.  
**2nd Floor**

City & State

**Delray Beach FL**

City & State

**Delray Beach FL**

4. FEI Number **59-3594231**

Applied For  
 Not Applicable

Zip  
**33445**

Country  
**USA**

Zip  
**33445**

Country  
**USA**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ARONBERG, DAVID T**  
 301 YAMATO RD., STE 3110  
 BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name **DAVID T. ARONBERG**  
 Street Address (P.O. Box Number is Not Acceptable)  
**2160 W. Atlantic Ave.**  
**2nd Floor**  
 City **Delray Beach FL** Zip Code **33445**

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 *David T. Aronberg*  
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**7/30/02**

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>ARONBERG, DAVID T</b> <b>301 YAMATO RD, STE 3110</b> <b>BOCA RATON FL 33431</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>ARONBERG, CRAIG M</b> <b>3519 NW 61ST CIRCLE</b> <b>BOCA RATON FL 33496</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2160 W. Atlantic Ave., 2nd Floor</b> <b>Delray Beach FL 33445</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (4/02)

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: **SIGNATURE REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/30/02** **SGA 266 919**  
 Date Daytime Phone #

*Attachment*  
*Law Offices of*  
**Aronberg & Aronberg**

*A Professional Association*

2160 West Atlantic Avenue  
Second Floor  
Delray Beach, Florida 33445

Web Site: <http://www.lawyers.com/aronberg>

\* David T. Aronberg, Esquire  
\* Elisa J. Aronberg, Esquire  
Lisa A. Franz, Paralegal  
Priscilla K. Moore, Paralegal  
\* Licensed in Florida and New Jersey

Telephone: (561) 266-9191  
Facsimile: (561) 988-8100  
Email: Daronberg@aol.com

July 30, 2002

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

**Re: Global Asset Investments, Inc.  
Document # P99000065837**

Dear Sir/Madam:

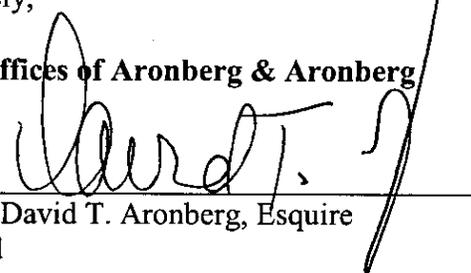
Enclosed please find my 2002 Uniform Business Report and check for \$158.75. I am submitting the normal fee for filing because I just received the annual report in the mail and did not have the opportunity to file this on time. I have enclosed the original mailing indicating that the mail was not forwarded to me.

I am requesting that you waive the additional late filing fee due to these circumstances out of my control.

Thank you for your anticipated cooperation with this request.

Sincerely,

**Law Offices of Aronberg & Aronberg**

By: 

David T. Aronberg, Esquire

DTA/td

Enclosures

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