

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000089324

1. Entity Name

GLOBAL-TECH RESOURCES, INC.

FILED

Feb 06, 2001 8:00 am
Secretary of State

02-06-2001 90330 040 ***150.00

Principal Place of Business

3500 PARK CENTRAL BLVD., N.
POMPANO BEACH FL 33064

Mailing Address

P O BOX 541510
LAKE WORTH FL 33454

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 65-0953356

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

KAY, ROBERT
KAY & ROGER, P.A.
6261 NW 6TH WAY SUITE 103
FORT LAUDERDALE FL

Name

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

City

FL

Zip Code

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

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!!! FEE IS \$150.00
After MAY 1, 2001 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	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	D	MCGOVERN, KATHLEEN	3500 PARK CENTRAL BLVD., N. POMPANO BEACH FL 33064				
	D	LASSNER, MICHAEL	3500 PARK CENTRAL BLVD., N. POMPANO BEACH FL 33064				
	D	PORES, SHERYL	3500 PARK CENTRAL BLVD., N. POMPANO BEACH FL 33064				
	D	NATALE, JANICE	3500 PARK CENTRAL BLVD., N. POMPANO BEACH FL 33064				

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:

KATHLEEN MCGOVERN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 30, 2001 (954) 971-6168

Date

Daytime Phone #

CR2E034 (10/00)