

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 28, 2001 08:00 AM**
Secretary of State**DOCUMENT # P99000099254**1. Entity Name
GLOBAL ESCROW SERVICES, INC.

Principal Place of Business

119 W. WINDHORST RD.

BRANDON
33510

FL

Mailing Address

119 W. WINDHORST RD.

BRANDON
33510

FL

2. Principal Place of Business

9611 E. HILLSBOROUGH AVE

3. Mailing Address

9611 E. HILLSBOROUGH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TAMPA

FL

City & State

TAMPA

FL

4. FEI Number

59-3609176

Applied For

Not Applicable

Zip
33610

Country

Zip
33610

Country

5. Certificate of Status Desired

☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

ELMALEH FRANCOIS
119 W. WINDHORST RD.BRANDON
33510

FL

US

7. Name and Address of New Registered Agent

Name

RYAN JOSEPH

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

9611 E. HILLSBOROUGH AVE.

City
TAMPA

FL

Zip Code
33610

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 **JOSEPH RYAN**

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

(NOTE: Registered Agent signature required when reinstating)

04/28/2001

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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	REEVES MELVIN	
STREET ADDRESS	119 W. WINDHORST RD	
CITY-ST-ZIP	BRANDON FL 33510	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LONGWELL JIM	
STREET ADDRESS	119 W. WINDHORST RD.	
CITY-ST-ZIP	BRANDON FL 33510	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	LONGWELL PHYLLIS	
STREET ADDRESS	119 W. WINDHORST RD.	
CITY-ST-ZIP	BRANDON FL 33510	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	RYAN SANDRA	
STREET ADDRESS	119 W. WINDHORST RD.	
CITY-ST-ZIP	BRANDON FL 33510	
TITLE	PD	<input type="checkbox"/> Delete
NAME	ELMALEH FRANCOIS	
STREET ADDRESS	119 W. WINDHORST RD.	
CITY-ST-ZIP	BRANDON FL 33510	
TITLE	DC	<input type="checkbox"/> Delete
NAME	RYAN JOSEPH G	
STREET ADDRESS	119 W. WINDHORST RD.	
CITY-ST-ZIP	BRANDON FL 33510	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RYAN SANDRA	
STREET ADDRESS	9611 E. HILLSBOROUGH AVE.	
CITY-ST-ZIP	TAMPA FL 33610	
TITLE	PRES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RYAN JOSEPH G	
STREET ADDRESS	9611 E. HILLSBOROUGH AVE.	
CITY-ST-ZIP	TAMPA FL 33610	

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: **Joseph Ryan**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pres

04/28/2001

Date

Daytime Phone #

CR2E034 (11/00)