2001	UNIFORM BUSI	NESS REPO	RT (UBI	R)					
DOCUMENT # 499000 [0 550 5						c n			
GLOBAL BOWNDARIES INC					FILED OI OCT 15 AM ID: 28				
Principal Place of Business Mailing Address					יון טעויי	W DE STATE			
3910 GOODRICH AVE SAME SARASOTA FL 34234					SECRETAL TALLAHAS	Y OF STATE. SEE FLORIDA	.	•	
	lace of Business								
3910 GOODRICH AUE Suite, Apt. #, etc.			AME		DO NOT WRITE IN THIS SPACE				
City & State	SOTA FL	City & State		4.	FEI Number 65 - 091	. 0020		lied For Applicable	
Zip // 1	Country	Zip	Country	5.	Certificate of Status Des	ired □ \$8	.75 Addit		
372	6. Name and Address of Current Re	egistered Agent	1	7.	Name and Address of N		Required		
5	SYAN L. GENTLE 315 8th Ave DRI BRADENTON FL		Street Ar	HUTHE ddress (P.O. E 53 BR	A DENTON	RWHART/ DrW FL 3420 FL	9 Zip Code	GENTE	,
8. The above	named entity submits this statement for the	ne purpose of changing its re	gistered office or	registered ag	gent, or both, in the State	of Florida.			
SIGNATURE	Signature, typed of printed name of registral agent and	title if applicable. (NOTE: F	Registered Agent signatu	ure required when r	'einstating)	10/09 DATE	/01		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After September 12, 2 Make Check Payable				e \$750.00	10. Election Campai Trust Fund Contr		\$5.00 Added to	May Be o Fees	
11.	OFFICERS AND DI		12.	T	ODITIONS/CHANGES TO				_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT RYAW LANCE GE 5315 STUAULD BRADOUTOU FL 342	e. w	NAME STREET ADDRESS CITY-ST-ZIP	3330	e presiden tia a. Geri 17th StW Enton Fly	WHART] Change	Addition Addition	25) +5037
TITLE NAME	Y	☐ Delete	TITLE NAME		-		Change	☐ Addition ☐	5
STREET ADDRESS CITY-ST-ZIP	·		STREET ADDRESS CITY-ST-ZIP			700			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deleie	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-11.	_ 1 46691 106/01010 ***750.00	00-	□ Addition	
TITLE NAME STREET AODRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Mr	<u> </u>	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change .	Addition	
 I hereby c indicated of the corp changed, 	ertify that the information supplied with the on this report or supplemental reports to the occation or the receiver or trustee ampower or on an attachment with an audiess, with	is filing does not qualify for the and accurate and that my bred to execute this report as all other like empowered.	ne exemption stat signature shall ha required by Cha	ed in Section ave the same pter 607, Flori	legal effect as if made us ida Statutes; and that my	nder oath; that I am a name appears in Bl	in officer or ock 11 or B	director lock 12 if	
SIGNATURE: 10/09/01 94/927 6000									