

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 06, 2001 8:00 am**  
**Secretary of State**

08-06-2001 90002 003 \*\*\*150.00

**DOCUMENT # S77364**

1. Entity Name

**GLOBAL NAV-COMM., INC.**

Principal Place of Business

**3638 S WESTSHORE BLVD  
TAMPA FL 33629  
US**

Mailing Address

**3638 S WESTSHORE BLVD  
TAMPA FL 33629  
US**

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

**59-3085356**

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

**NEWMAN, CHRISTINE MARIE  
3638 S WESTSHORE BLVD  
TAMPA FL 33629**

Name

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

City

**Tampa FL**

**FL**

Zip Code

**33629**

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)

**7-30-01**

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 \$550.00  
After September 12, 2001 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 **D** ☐ Delete  
NAME **NEWMAN, CHRISTINE MARIE**  
STREET ADDRESS **3638 S WESTSHORE BLVD**  
CITY-ST-ZIP **TAMPA FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **Treasurer & President**  
STREET ADDRESS **NEWMAN MICHAEL D.**  
CITY-ST-ZIP **3638 S Westshore Blvd.  
Tampa, FL 33629**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
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CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

**Michael D. Newman**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-30-01**  
Date

**(813) 839-7050**  
Daytime Phone #

0088464 AV

CR2E034 (5/01)

Attachment Doc# S77364  
A0080648

**GLOBAL NAV-COMM INC.**

3638 Westshore Blvd. South  
Tampa, FL., 33629  
Phone (813) 839-1050  
Fax (813) 831-5703

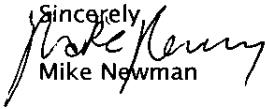
July 31, 2001

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL., 32303-1500  
Reference DOC# S77364

Dear Friend, -

I am sending a check for \$150.00 of payment of UBR for 2001. I did not receive first notice of payment in mail. I didn't realized of the payment or the due date until I received second notice. I appreciate of this payment would take care of this matter.

Sincerely,

  
Mike Newman