

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Aug 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V09823** (8)

1. Corporation Name
GLOBAL TECHNOLOGY MANAGEMENT, INC.



Principal Place of Business
**7305 W SAMPLE RD
SUITE 201
CORAL SPRINGS FL 33065
US**

Mailing Address
**P.O. BOX 14093
FT. LAUDERDALE FL 33302
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3a. Date of Last Report	
21 100 West Cypress Creek Rd.		3. Date Incorporated or Qualified 01/29/1992	
Suite, Apt. #, etc. 22 Suite 980		4. FEI Number 65-0307157	
City & State 23 Fort Lauderdale, FL		Applied For Not Applicable	
Zip 24 33309		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Country 25 USA		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
26 100 West Cypress Creek Rd.		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
Suite, Apt. #, etc. 27 Suite 980			
City & State 28 Fort Lauderdale, FL			
Zip 29 33309			
Country 30 USA			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
TIGHE, EDWARD M. 121 FIESTA WAY SUITE 508 FT. LAUDERDALE FL 33301		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	TIGHE, EDWARD M.	1.2 NAME	
STREET ADDRESS	121 FIESTA WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 of this filing or in an attachment with an address.

CR2E034 (4/97)