FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90169 005 ***150.00

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1. Corporation Name

GLOBE AUTOMOTIVE, INC.

							-		AL DEUR BURK ENDE		
Principal Place of Business Mailing Address											
4301 N DIXIE HWY 4301 N DIXIE HWY									•		
POMPANO BEACH FL 33064 POMPANO BEACH FL 33064							DO NOT WOLTS IN THE SOASS				
US US							DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed 03/09/1992				
2. Principal Place of Business			2a, Mailing Address				4. FEI Number	-5-7	Applied For]	
21			6				65-0165313		Not Applicable	1	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					\$8.75	5 Additional	1	
22			7				5. Certificate of Status Desired Fee Required				
City & State			City & State				6. Election Campaign Financing \$5.00 May Be				
23			28				Trust.Fund.Contribution	-	d to Fees	= ؛	
Zip Country			Zip Country				This corporation owes the current year Intangible				
24	25	29	30				Personal Property Tax.				
	9. Name and Address of Curre	ent Regis	stered Agent				10. Name and Address of New Registered Ag	ent		1	
				8	31	Name					
1	rafesa, paul			-	32 :	Ctront Addro	dress (P.O. Box Number is Not Acceptable)				
4211 NE 12TH TERRACE						Stieet Addie	iss (F.O. Box Number is Not Acceptable)				
POM	PANO BCH FL 33064			8	33					1	
ĺ			•	L						-	
Ļ				. 8	34 (City	FL	85 Zi	ip Code		
11 Pursuant	to the provisions of Sections 607.0	02 and F	307.1508. Florida Statutes	s. the abo	ove-r	named corpo	ration submits this statement for the purpose of ch	anging	its registered	1	
office or re	egistered agent, or both, in the Stat	e of Flori	da. Such change was au	thorized t	by th	e corporation	n's board of directors. I hereby accept the appointr	nent as	registered		
agent, Jai	m familiar with, and accept the oblig	jations of	r, Section 607.0505, Plots	oa Statut	es.						
SIGNATURE	Signature, typed or printed name of registered a	ent and title	if annicable (NOTE: F	Registered Ar	nent si	ignature required	when reinstating) DATE			Ι.	
12.	OFFICERS A			13.		<u> </u>	ADDITIONS/CHANGES TO OFFICERS AND	DIREC	TORS IN 12	1	
TITLE	Р		DELETE	1,1 TITLE	E			Chang		1	
NAME	PIETRAFESA, PAUL			1.2 NAM	E	1	,				
STREET ADDRESS	4211 NE 12TH TERRACE					DDRESS					
CITY-ST-ZIP	POMPANO BCH FL 33064			1.4 CITY						}	
TITLE	V		☐ DELETE	2.1 TITLE				Chang	ge Addition	1.	
NAME	LEVY, RON			2.2 NAMI		1		_		1	
1	875 NE 48 ST LOT 137			2.3 STRE		nnoess					
STREET ADDRESS	POMPANO BCH FL 33064			i						ĺ	
CITY-ST-ZIP	FORFARO DOTI FL 33004		DELETE	2.4 CITY 3.1 TITLE		417		Chang	ge Addition	1	
TITLE	•		L DELLIL	3.1 11CE		1				1	
NAME						DDDEEC				1	
STREET ADDRESS	· • • • • • • • • • • • • • • • • • • •		سنختاء هاسريدان	3.3 STRE		l	.			1	
CITY-ST-ZIP	 -		☐ DELETE	3.4. CITY 4.1 TITLE		411		Chang	ge Addition	1	
TITLE			C DELETE			1			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.	
NAME				4. 2 NAM							
STREET ADDRESS						DDRESS					
CITY-ST-ZIP			□ DELETE	4.4 CITY		ZIP		Châng	ge Addition	1	
TITLE			☐ DELETE	5.1 TITLE			ľ	""I Augus	,s		
NAME				5.2 NAMI		000500				İ	
STREET ADDRESS				5.3 STRE		1					
CITY-ST-ZIP	<u> </u>			5.4 CITY		ZIP		705-		-	
TITLE			☐ DELETE	6.1 TITLE]	l	Chang	ge		
NAME				6.2 NAM		ł					
CTREET ADDRESS				6.3 STRE	FET AL	DORESS				1	

CITY-ST-ZIP 14. 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 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 comparation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or or an articular with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE