

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 327468

FILED
Jan 14, 2009
Secretary of State

Entity Name: GLADYS APARTMENTS, INC.

Current Principal Place of Business:

16400 NE 29 AVENUE
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

16400 NE 29 AVENUE
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 59-1230835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARAZOZA & FERNANDEZ-FRAGA, PA
2100 SALZEDO STREET
SUITE 300
CORAL GABELS, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SUERO, HEIDI G
Address: 15356 SW 40 STREET
City-St-Zip: DAVIE, FL 33331

Title: VP () Delete
Name: GOMEZ, RODOLFO A
Address: 16400 NE 29 AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: SEC () Delete
Name: MARIN, AURELIA
Address: 16400 NE 29 AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: VP () Delete
Name: GOMEZ, RODOLFO R
Address: 16400 NE 29 AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RODOLFO A GOMEZ

VP

01/14/2009

Electronic Signature of Signing Officer or Director

Date