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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 664825

1. Corporation Name

GLAMOU	RIN	APORTS, INC.							
G		11.						AMERIANAN ARABI A	B) 0,411 1961
	-	• •							
Principal Place	of Bu	siness	Mailing Address				6 200510 Maire Britan 1830 gabet etti Ater	FIRM CONTRACTOR	
2199 NW 20 ST	1.5	,	2199 NW 20 ST				· ·		
1 AND 2		SUITE 1 AND 2							
MIAMI FL 33142			MIAMI FL 33142				DO NOT WRITE IN TH	S SPACE	
US			US				3. Date Incorporated or Qualifed		
							02/27 <u>/ 1980</u>		
2. Principal Pla	ace of	Business	2a. Mailing Address				4. FEI Number	Apr	olied For
21	-		26				59-1990217		Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	
22	,							Fee Re	quired
City & State	.		City & State				6. Election Campaign Financing	\$5.00	
23			28				Trust Fund Contribution	Added to	Fees
Zip		Country	Zip	Cou	ntry		8. This corporation owes the current year l		. .
24		25	29	30	,		Personal Property Tax.		ZNo
	9.	Name and Address of Curren	t Registered Agent		4.1		10. Name and Address of New Registere	d Agent	
		· · · · · · · · · · · · · · · · · · ·			81	Name			}
		, LAWERNCE G			82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
		12TH AVE			Ш				
MIAN	AI FL	33130			83				ſ
					84	City		. 85 Zip C	ode
						•	<u>F</u>	L	
11. Pursuant t	to the	provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the a	bove	-named corpo	ration submits this statement for the purpose	of changing its	registered
office or re	egistei n fam	ed agent, or both, in the State liar with, and accept the obliga	of Florida. Such change was a tions of, Section 607,0505, Fig	autnorized orida Stati	i by t utes.	ne corporation	's board of directors. I hereby accept the app	Ontarient as reg	gistered
									ļ
SIGNATURE	Signatu	re, typed or printed name of registered age	nt and title if applicable. (NOT		Agent	signature required			
12.		OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
						I			
TITLE	DSF	2	☐ DELETE	1.1 TF	ΠE			☐ Change	☐ Addition
TITLE NAME	MEI	RCHANT, M. ALI		1.1 Tf 1.2 N/				☐ Change	
1	MEI	2		1.2 N/	AME	ADDRESS		☐ Change	
NAME	MEI 153	RCHANT, M. ALI		1.2 N/ 1.3 S1	AME				☐ Addition
NAME STREET ADDRESS	MEI 153	RCHANT, M. ALI WEST 21ST ST.		1.2 N/ 1.3 S1	ame Ireet Ty-st-			☐ Change	
NAME STREET ADDRESS CITY-ST-ZIP	MEI 153	RCHANT, M. ALI WEST 21ST ST.	. DELETE	1.2 N/ 1.3 S1 1.4 CI	AME TREET TY-ST TLE				☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	MEI 153	RCHANT, M. ALI WEST 21ST ST.	. DELETE	1.2 N/ 1.3 S1 1.4 CI 2.1 TT 2.2 N/	ame Treet Ty-st Tle Ame				☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MEI 153	RCHANT, M. ALI WEST 21ST ST.	DELETE	1.2 N/ 1.3 S1 1.4 Cl 2.1 Tl 2.2 N/ 2.3 S1	ame Treet Ty-st Tle Ame	ADDRESS .		☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MEI 153	RCHANT, M. ALI WEST 21ST ST.	DELETE	1.2 N/ 1.3 S1 1.4 Cl 2.1 Tl 2.2 N/ 2.3 S1	AME TY-ST TLE AME TREET	ADDRESS .	· · · · · · · · · · · · · · · · · · ·		☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEI 153	RCHANT, M. ALI WEST 21ST ST.	DELETE	1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C	AME TREET, TY-ST TLE AME TREET TITY-ST	ADDRESS .	· · · · ·	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MEI 153	RCHANT, M. ALI WEST 21ST ST.	DELETE	1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C 3.1 TI 3.2 N/	AME TY-ST- TLE AME TREET TTY-ST TLE	ADDRESS .	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MEI 153	RCHANT, M. ALI WEST 21ST ST.	DELETE	1.2 N/ 1.3 SI 1.4 CI 2.1 TI 2.2 N/ 2.3 SI 2.4 C 3.1 TI 3.2 N/ 3.3 SI	AME TY-ST- TLE AME TREET TTY-ST TLE	ADDRESS - ADDRESS - ADDRESS -	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MEI 153	RCHANT, M. ALI WEST 21ST ST. LEAH FL	DELETE	1.2 N/ 1.3 SI 1.4 CI 2.1 TI 2.2 N/ 2.3 SI 2.4 C 3.1 TI 3.2 N/ 3.3 SI	AME TY-ST TLE AME TTY-ST TLE TTY-ST TLE AME TREET	ADDRESS - ADDRESS - ADDRESS -		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEI 153	RCHANT, M. ALI WEST 21ST ST. LEAH FL	DELETE	1.2 N/ 1.3 SI 1.4 CI 2.1 TI 2.2 N/ 2.3 SI 2.4 C 3.1 TI 3.2 N/ 3.3 SI 3.4 C	AME TY-ST TLE TREET TREET TREET TREET TREET TREET TTLE	ADDRESS - ADDRESS - ADDRESS -		☐ Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MEI 153	RCHANT, M. ALI WEST 21ST ST. LEAH FL	DELETE	1.2 N/ 1.3 SI 1.4 CI 2.1 Π 2.2 N/ 2.3 SI 2.4 C 3.1 Π 3.2 N/ 3.3 SI 3.4 C 4.1 Π 4.2 N/	TY-ST. TLE AME TREET TITLE	ADDRESS - ADDRESS - ADDRESS -		☐ Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MEI 153	RCHANT, M. ALI WEST 21ST ST. LEAH FL	DELETE	1.2 N/ 1.3 SI 1.4 CI 2.1 Π 2.2 N/ 2.3 SI 2.4 C 3.1 Π 3.2 N/ 3.3 SI 3.4 C 4.1 Π 4.2 N/ 4.3 SI	TY-ST. TLE AME TREET TITLE	ADDRESS . T-ZIP ADDRESS . T-ZIP ADDRESS ADDRESS		☐ Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MEI 153	RCHANT, M. ALI WEST 21ST ST. LEAH FL	DELETE	1.2 N/ 1.3 SI 1.4 CI 2.1 Π 2.2 N/ 2.3 SI 2.4 C 3.1 Π 3.2 N/ 3.3 SI 3.4 C 4.1 Π 4.2 N/ 4.3 SI	TY-ST TLE TREET TY-ST TLE TREET TTLE TTLE TTLE TTLE TTLE TTL	ADDRESS . T-ZIP ADDRESS . T-ZIP ADDRESS ADDRESS		☐ Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	MEI 153	RCHANT, M. ALI WEST 21ST ST. LEAH FL	DELETE	1.2 N/ 1.3 SI 1.4 CI 2.1 Π 2.2 N/ 2.3 SI 2.4 C 3.1 Π 3.2 N/ 3.3 SI 3.4 C 4.1 Π 4.2 N/ 4.3 SI 4.4 CI	TY-ST. TILE AME TREET TITY-ST TILE TITY-ST TITY-ST TITY-ST TILE TITY-ST TILE TITY-ST TILE TITY-ST TILE TITY-ST TILE	ADDRESS . T-ZIP ADDRESS . T-ZIP ADDRESS ADDRESS		☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	MEI 153	RCHANT, M. ALI WEST 21ST ST. LEAH FL	DELETE	1.2 N/ 1.3 SI 1.4 CI 2.1 π 2.2 N/ 2.3 SI 2.4 C 3.1 π 3.2 N/ 3.3 SI 3.4 C 4.1 π 4.2 N/ 4.3 SI 4.4 CI 5.1 π 5.2 N/ 5.5	TY-ST. TLE AME TREET TY-ST TLE TY-ST TLE TY-ST TLE TY-ST TLE TY-ST TLE TY-ST TLE AME TY-ST TLE AME TY-ST TLE AME TY-ST TLE AME TREET TY-ST TLE AME	ADDRESS . T-ZIP ADDRESS . T-ZIP ADDRESS ADDRESS		☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MEI 153	RCHANT, M. ALI WEST 21ST ST. LEAH FL	DELETE	1.2 N/ 1.3 SI 1.4 CI 2.1 Π 2.2 N/ 2.3 SI 2.4 C 3.1 Π 3.2 N/ 3.3 SI 3.4 C 4.1 Π 4.2 N/ 4.3 SI 4.4 CI 5.1 Π 5.2 N/ 5.3 SI	TY-ST. TLE AME TREET TY-ST TLE TY-ST TLE TY-ST TLE TY-ST TLE TY-ST TLE TY-ST TLE AME TY-ST TLE AME TY-ST TLE AME TY-ST TLE AME TREET TY-ST TLE AME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS		☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MEI 153	RCHANT, M. ALI WEST 21ST ST. LEAH FL	DELETE	1.2 N √ 1.3 SI 1.4 CI 2.1 TT 2.2 N √ 2.3 SI 3.4 C	TREET. TY-ST TLE TREET TILE TREET TILE TREET. TY-ST TLE TREET. TY-ST TLE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS		☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition Addition

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 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 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: