FOR PROFIT CORPORATION 2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 27, 2002 8:00 am Secretary of State

DOCUMENT # P99000059139 1. Entity Name GLOW-FLOW, INC.					05-27-2002 90446 016 ***150.00	
D	O NOT WRITE	IN THIS SPA	ACE			
2. Principal Place of Business 2902 WEST MARK DRIVE Suite, Apt. #, etc.		3. Mailing Address 2902 WEST MARK DRIVE Suite, Apt. #, etc.		Ε	DO NOT WRITE IN TH	HS SPACE
City & Sta SARASO'		City & State SARASOTA, FI	 L		FEI Number 5-0931682	Applied For Not Applicable
Zip 34232	Country USA		Country USA	5.	Certificate of Status Desired	\$8.75 Additional Fee Required
عب وحمد	- DO NOT W	RITE	Name DEMP	ERIO,	HAROLD S	ered Agent
	IN THIS SP		2902	WEST	Box Number is Not Acceptable) MARK DRIVE	
			City SARA	SOTA	F	Zip Code 34232
8. The above	e named entity submits this statemen	it for the purpose of changing	g its registered offi	ce or regist	ered agent, or both, in the State of FI	
SIGNATURE	Signature, typed or printed name of regis	ered agent and title if applicable	. (NOTE: Regist	ered Agent s	ignature required when reinstating)	DATE
Tax filing r	oration is eligible to satisfy its Intangi equirement and elects to do so. ria on back)	After May	May 1 Fee is \$150. 1, Fee is \$550.00 d UBR is \$61.25 ble to Department		10. Election Campaign Financing Trust Fund Contribution.	g \$5.00 May Be Added to Fees
11.	OFFICERS AND D					
TITLE :	D HAROL	D 0	TITLE			CR2E034B (12/01)
NAME STREET ADDRESS	DEMPERIO, HAROL 2902 WEST MARK		NAME STREET ADDRESS			B (
CITY - ST - ZIP	SARASOTA, FL 34		CITY - ST - ZIP			034
TITLE	D	232	TITLE			325
NAME	SEELEY, DAWN M		NAME			الله الله الله الله الله الله الله الله
STREET ADDRESS	RESS 2902 WEST MARK DRIVE		STREET ADDRESS			
CITY - ST - ZIP	SARASOTA, FL 34	232	CITY - ST - ZIP	- .		
TITLE NAME			TITLE			
STREET ADDRESS			NAME STREET ADDRESS			, ,
CITY - ST - ZIP			- CITY-ST-ZIP -	<u></u>	DO NOT_WR	(ITE==== -===)
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13 Lhereby ce	urtify that the information aventing the	h this filing door got gualified	for the exemption of	tated is C-	otion 110 07/2\G\ Florida Ct.	further aggift that the
information an officer of	n indicated on this report or supplem-	ental report is true and accuracions or trustee empowered	rate and that my si d to execute this re	gnature sha	ction 119.07(3)(i), Florida Statutes. I ill have the same legal effect as if ma uired by Chapter 607, Florida Statute	ade under oath; that I am