

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 12, 2014
Secretary of State
CC2958584483

Entity Name: GL SPECIALTY SERVICES, INC.

Current Principal Place of Business:

1709 BANKS ROAD
BUILDING A, UNIT 5
MARGATE, FL 33063

Current Mailing Address:

1709 BANKS ROAD
BUILDING A, UNIT 5
MARGATE, FL 33063 US

FEI Number: 45-4035785

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHWARTZ, STEVEN GESQ.
6751 NORTH FEDERAL HIGHWAY
SUITE 400
BOCA RATON, FL 33487 US

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

Officer/Director Detail :

Title PD
Name CONDE, ROBERT
Address 1709 BANKS ROAD, BUILDING A, UNIT 5
City-State-Zip: MARGATE FL 33063

Title VPD
Name DE LA PAZ, ROBERT
Address 1709 BANKS ROAD, BUILDING A, UNIT 5
City-State-Zip: MARGATE FL 33063

Title SD
Name CALIFANO, JUDI
Address 1709 BANKS ROAD, BUILDING A, UNIT 5
City-State-Zip: MARGATE FL 33063

Title TD
Name MINEI, MINDY
Address 1709 BANKS ROAD, BUILDING A, UNIT 5
City-State-Zip: MARGATE FL 33063

Title D
Name MINEI, LAWRENCE J
Address 1709 BANKS ROAD, BUILDING A, UNIT 5
City-State-Zip: MARGATE FL 33063

Title D
Name CALIFANO, GERRY
Address 1709 BANKS ROAD, BUILDING A, UNIT 5
City-State-Zip: MARGATE FL 33063

I hereby 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 all other like empowered.

SIGNATURE: LAWRENCE J. MINEI

D

03/12/2014

Electronic Signature of Signing Officer/Director Detail

Date