

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000126585

**Entity Name:** GLOPRE,LLC

**Current Principal Place of Business:**

7901 KINGSPONTE PKWY # 8  
ORLANDO, 32819

**Current Mailing Address:**

7901 KINGSPONTE PKWY # 8  
ORLANDO, 32819 AF

**FEI Number:** 46-1124737

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SRESNEWSKY, KYRIL  
7901 KINGSPONTE PKWY # 8  
ORLANDO, FL 32819 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

**Authorized Person(s) Detail :**

Title MGR  
Name SRESNEWSKY, KYRIL  
Address 7901 KINGSPONTE PKWY # 8  
City-State-Zip: ORLANDO FL 32819

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KYRILL SRESNEWSKY

MGR

08/28/2017

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date