## FILED Apr 25, 2003 8:00 am Secretary of State

## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 437591  1. Entity Name . VIC GLASER, INC.					Secretary of State 04-25-2003 90299 043 ***150.00
Principal Place of Business 4000 TOWERSIDE TERR APT 606 MIAMI FL 33138			Mailing Address 4000 TOWERSIDE TERR APT 606 MIAMI FL 33138		
2. Principal Place of Business		3. Mai	3. Mailing Address		E IDDORIJ BERBO LIJRIJ EGODI BAIRU HALDI HIDI DABIT GILDIF BADIT DADIT DADIT DIDIT LODA
Suite, Apt. #, etc.		Suite	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State		City	City & State		4. FEI Number 59-1493452 Applied For Not Applicable
Zip	Country	Zip	<u> </u>	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of C	urrent Registere	ed Agent		7. Name and Address of New Registered Agent
WEINER, JEFFREY S 2250 SW 3RD AVE MIAMI FL 33129					(P.O. Box Number is Not Acceptable)
INICAMI I L				City	Zip Code
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regist)  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State				: Registered Agent signature require	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.	OFFICER	S AND DIRECTO	RS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GLASER, VICTOR 4000 TOWERSIDE TERR # MIAMI FL 33138		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.