


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Jul 06, 2004 08:00 AM  
Secretary of State**

0000000000 454725 1. Entity Name GLIK, INC.	
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Principal Place of Business C/O BRINKERHOFF PROPERTY MGMT 154 S PENINSULA DR DAYTONA BCH, FL 32118	Mailing Address C/O BRINKERHOFF PROPERTY MGMT 154 S PENINSULA DR DAYTONA BCH, FL 32118
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07012004 000000 000000000000

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-1593305	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 00000000 0000000000

6. Name and Address of Current Registered Agent  MOLTANE, STEPHEN 154 S PENINSULA DR DAYTONA BCH, FL 32118
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<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 000000 0000000000	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST MOLTANE, STEPHEN 154 S PENINSULA DR DAYTONA BCH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P THOMPSON, MIKE 154 S. PENINSULAR DR. DAYTONA BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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<p>000000163380 07/06/04-80012-008 150.00</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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12. 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 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.

SIGNATURE: Stephen Moltane **STEPHEN MOLTANE** 7/1/04 386 258-3802  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #