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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

518401 DOCUMENT #

Country

9. Name and Address of Current Registered Agent

25

WALDSTEIN, PHILIPS G

7563 W OAKLAND PK BLVD LAUDERHILL FL 33319

(5)

GLORIA PHILIPS, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zio

Mailing Address

2a. Mailing Address

City & State

Zio

Suite, Apt. #, etc.

26

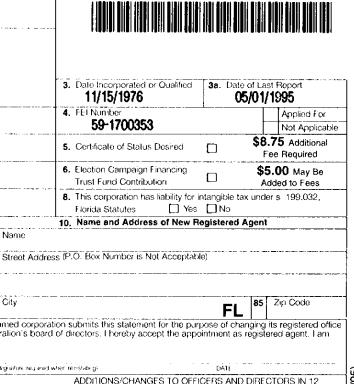
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7563 W. OAKLAND PARK BLVD. LAUDERHILL FL 93319

7563 W. OAKLAND PARK BLVD. LAUDERHILL FL 33319



City 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE rature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE ☐ Change ☐ Addition TILLE 1.1 TITLE WALDSTEIN, GLORIA NAME 1.2 NAME 1702 HAMMOCK BVLD. STREET ADDRESS 1.3 STREET ADDRESS COCONUT CREEK FL CITY - ST - ZIP 14 CHTY - \$1 - ZIP DELETE 2 1 THILE Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CIY-ST-ZIP 2.4 CITY - ST - ZIP DELFTE TITLE 3 1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIF 34 CITY - \$1 - 7IP DELETE [1] Change Addition TILLE 4 1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4 4 CITY - ST - Z P CUTY-ST-ZIP Addition TITLE DELETE Change 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - S1 - ZIP 5 4 CITY - ST - 7:P DELETE Change TITLE Addition 6.13:TLE NAME 5.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

Country

81 Name

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64 CITY-SI-ZP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 pame 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 pame

PORIA WALDSTEIN 4/10/96

CR2E034