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**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 518401 (5)

GLORIA PHILIPS, INC.

FILED	
Apr 06 1998 8:00am	]
Secretary of State	

|--|--|

Principal Place of Business   TASS W OALAND PARK BLV).   ADERHAL FL 3319   ADDITIONAL FL 3419									
AUDERHILL FL 3319	Principal Plac	e of Business	Mailing Addi	ess				I BIBII BEBII DIBII BIBII DI	JOH 81811 1881
11/15/1976	7563 W. OAKLAND PARK BLVD. 7563 W. OAKLAND PARK BLVD.					DO NOT WRITE IN THIS SPACE			
2. Marriage of Business   2. Marriage Activess   3. Max Automatics   3. Self April 4. etc.   5. Self Young   5. Certificate of Status Desired   5. Additional Fee Regulatory   5. Certificate of Status Desired   5. Additional Fee Regulatory   5. Certificate of Status Desired   5. Certificate   5. Certificate of Status Desired   5. Certificate   5. Certificate   5. Certificate   5. Certificate   5.	ļ						•		
25   Sulfa, Apt. #. etc.   25   Sulfa, Apt. #. etc.   27   Carly & State   Sp-1700353   St. Carlificate of Salatus Desired   Sp. 75 Additional Carlos of Salat					<u> </u>				
Solic Apt #, etc.		ace of Business	—	.ddress				<b>├</b>	· · · · · · · · · · · · · · · · · · ·
27	Suite Ant	# oto		1 # nto			59-1700353		
23		π, σιο.	<b>├</b> ─┐ `	t. #, etC.			5. Certificate of Status Desired		
20		0		ate .				···	
24 28 28 29 30	23								
28	r ZID	Count	·····		Countr	/			
Name and Address of Current Registered Agent   10, Name and Address of New Registered Agent   10	24	25	29	30					
Test address (P.O. Box Number is Not Acceptable)  82   Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84   City   FL   85   2   Code  85   City   FL   85   2   Code  86   City   FL   85   2   Code  87   City   FL   85   2   Code  88   City   FL   85   2   Code  89   City   FL   85   2   Code  89   City   FL   85   2   Code  80   City   FL   85   2   Code  81   City   FL   85   2   Code  81   City   FL   85   2   Code  82   City   FL   85   2   Code  83   City   FL   85   2   Code  84   City   FL   85   2   Code  85   City   FL   85   2   Code  86   City   FL   85   2   Code  86   City   FL   85   2   Code  87   City   FL   85   2   Code  88   City   FL   85   2   Code  89   City   FL   85   2   Code  89   City   FL   85   2   Code  80   City   FL   85   2   Code  81   City   FL   85   2   Code  81   City   FL   85   2   Code  82   City   FL   85   2   Code  83   City   FL   85   2   Code  84   City   FL   85   2   Code  85   City   FL   85   2   Code  86   City   FL   85   2   Code  86   City   FL   85   2   Code  87   City   FL   85   2   Code  88   City   FL   85   2   Code  89   City   FL   85   2   Code  89   City   FL   85   2   Code  80   City   FL   85   2   Code  80   City   FL   85   City   FL   85   City   FL   85   City		g, Name and Addre	ess of Current Registered Age	nt					
LAUDERHILL FL 33319    Ball   City   FL   Bs   Zip Code	j WA	ldstein, Philips G			81	Name			
LAUDERHILL FL 33319  88  City FL 85 Zep Codo  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. The above-named corporation submits this statement for the pursuant series of changing its registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in familiar with, and accept the origination of Section Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  VALOSTEIN, GLORIA  1702 HAMMOCK BVLD.  COCONUT CREEK FL  DELETE  DELETE  2 NAME  2 STREET ADDRESS  CITY-ST-ZP  DELETE  3 STREET ADDRESS  CITY-ST-ZP  1 Addition  NAME  STREET ADDRESS  CITY-ST-ZP  1 Addition  NAME  STREET ADDRESS  CITY-ST-ZP  1 Addition  NAME  STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZP  Addition  ADDRESS  STREET ADDRESS  CITY-ST-ZP  Addition  ADDRESS  STREET ADDRESS  CITY-ST-ZP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZP  Addition  ADDRESS  STREET ADDRESS  CITY-ST-ZP  Addition  ADDRESS  STREET ADDRESS  CITY-ST-ZP  ADDRESS  CITY-ST-ZP  ADDRESS  STREET ADDRESS  CITY-ST-ZP  AD			BLVD		82	Street Add	dress (P.O. Box Number is Not Acceptab	le)	
STREET ADDRESS   DELETE   DE	LAI	JDERHILL FL 33319							
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, 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 of the manufactory and accept the obligations of, Section 607.0505, Florida Statutes   SIGNATURE					83				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submite this statement for the purpose of charging its registered office or registered agont, 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 signal, or both, in the State of Florida Statutes agont. I am familiar with, and accept the objection objections of Section 607.0505, florida Statutes    SIGNATURE					64	City		85 7 <sub>II</sub>	Code
SIGNATURE    P						ĺ			
12.	l office of r	egi <b>ste</b> rea agent, or bott	n. In the State of Florida. Such cl	hange was author	ized h	v the corpore	rporation submits this statement for the pration's board of directors. I hereby accep	irpose of changing t the appointment a	its registered s registered
12.	SIGNATURE	_	•						
TITLE   WALDSTEIN, GLORIA   12 NAME   12 NAME   13 STREET ADDRESS   1702 HAMMOCK BYLD.   14 CITY-ST-ZIP   14 CITY-ST-ZIP   15				(NO1E: Regis	lered Ag	ant signature requ	uired when reinstating)	DA1E	
NAME   WALDSTEIN, GLORIA   12 NAME   1702 HAMMOCK BVLD.   13 STREET ADDRESS   1702 HAMMOCK BVLD.   13 STREET ADDRESS   14 CITY-ST-ZIP				22.000			ADDITIONS/CHANGES TO OFFIC		
1702 HAMMOCK BYLD.   13 STREET ADDRESS   14 CITY-S1-ZIP		•					•	L_1 Change	Addition
COTY-ST-ZP    COCONUT CREEK FL	l i								1:
TITLE									li i
MAME		OCCUPATION CHEEF	N FL			II - ZIP			
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CITY-ST-ZIP						1000000	•		
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CITY-ST-ZIP				I *		ADDRESS			
TITLE									
NAME		······································				AT EII		Change	Addition
A4 CITY-ST-ZIP	NAME			4	2 NAME				
A CITY-ST-ZIP	STREET ADDRESS					ADDRESS			
TITLE         DELETE         5.1 TITLE         Addition           NAME         5.2 NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS         CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE           NAME         G.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS	CITY-ST-ZIP								
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STREET ADDRESS	NAME			5.	2 NAME			_ ,	_
CITY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETE         6 1 TITLE         Change         Addition           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS         6.3 STREET ADDRESS	STREET ADDRESS					ADDRESS			Į.
TITLE         DELETE         6 1 TITLE         Change         Additio           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS	CITY-ST-ZIP								
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STREET ADDRESS 6.3 STREET ADDRESS	NAME			6.	2 NAME			_ •	
	STREET ADDRESS					ADDRESS			
	CITY-ST-ZIP								

14. I hereby certify that the information supplied with his filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informat indicated on this annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am a 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 12 or Block 13 if chapted, or on-an attachment with an adoless.