

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

10/2

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED

27 AUG 22 AM 11:16

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # F80283 (7)  
 1. Corporation Name  
 GLORIA'S SHOPPE, INC.



Principal Place of Business Mailing Address  
 % C. GLORIA GOSHORN % C. GLORIA GOSHORN  
 57 WOOD HALL DRIVE 57 WOOD HALL DRIVE  
 MULBERRY FL 33860 MULBERRY FL 33860

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
 21 GNC 26 GNC  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 22 3800 U.S. 98 NORTH 27 P.O. BOX 372127  
 City & State City & State  
 23 LAKELAND, FL 28 SATELLITE BEACH, FL  
 Zip Country Zip Country  
 24 33809 25 USA 29 32937 30 USA

3. Date Incorporated or Qualified 3a. Date of Last Report  
 04/30/1982 01/19/1996  
 4. FEI Number Applied For  
 59-2249620 Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
 GOSHORN, C. GLORIA  
 57 WOOD HALL DRIVE  
 MULBERRY FL 33860

10. Name and Address of New Registered Agent  
 81 Name GARY A. BALINSKY  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 348 SHERWOOD AVE.  
 83  
 84 City SATELLITE BEACH FL 85 Zip Code 32937

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 *G. A. Balinsky* GARY A. BALINSKY V.P. 8/18/97  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> DELETE
NAME	GOSHORN, GLORIA C	
STREET ADDRESS	57 WOOD HALL DRIVE	
CITY-ST-ZIP	MULBERRY, FL 00000	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	BALINSKY, GARY A.	
STREET ADDRESS	431 SANDPIPER DRIVE	
CITY-ST-ZIP	SATELLITE BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	300002277083--5
1.3 STREET ADDRESS	-08/26/97--01018--013
1.4 CITY-ST-ZIP	****173.75 ****173.75
2.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	BALINSKY, GARY A.
2.3 STREET ADDRESS	348 SHERWOOD AVE.
2.4 CITY-ST-ZIP	SATELLITE BEACH, FL 32937
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 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 name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *G. A. Balinsky*

CR2E034 (4/97)

2 of 2

8/18/97

Annual Reports Filing  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

RE: Corporate Annual Report  
Gloria's Shoppe, Inc.  
Document # F80283 (7)

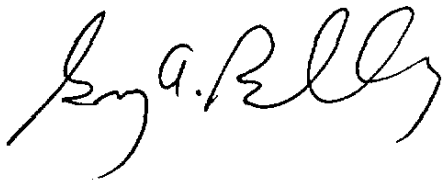
Today I spoke with Jim in your office concerning receipt of a second notice for filing our Corporate Annual Report for Gloria's Shoppe, Inc., Document # F80283 (7). I informed him that we filed the initial report in January 1997 with check # 4676 dated 1/3/97 for \$173.75 (\$165 + \$8.75). He advised me that he received a memo concerning this issue and to submit the report again, this letter and a replacement check.

Enclosed is the requested report and payment.

Please call if you have any questions or require any additional information:

407-951-8607

Sincerely,



Gary A. Balinsky  
Vice President

enclosures

copy: GCG  
file