

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H42127

Entity Name: GLISSADE-FLORIDA, INC.

FILED
Feb 21, 2008
Secretary of State

Current Principal Place of Business:

3004 BURNS AVENUE
WANTAGH, NY 117933202

New Principal Place of Business:

Current Mailing Address:

3004 BURNS AVENUE
WANTAGH, NY 117933202

New Mailing Address:

FEI Number: 58-1639247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LIEBMAN, IRVING,
Address: 3004 BURNS AVNEUE
City-St-Zip: WANTAGH, NY

Title: S () Delete
Name: LIEBMAN, LOUISE,
Address: 3004 BURNS AVENUE
City-St-Zip: WANTAGH, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LIEBMAN, IRVING,
Address: 3004 BURNS AVNEUE
City-St-Zip: WANTAGH, NY 11793

Title: S (X) Change () Addition
Name: LIEBMAN, LOUISE,
Address: 3004 BURNS AVENUE
City-St-Zip: WANTAGH, NY 11793

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUISE LIEBMAN

SECT

02/21/2008

Electronic Signature of Signing Officer or Director

Date