

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H53342** (2)
1. Corporation Name
GLOREN INVESTMENT CORPORATION



Principal Place of Business
**% GLENN L. HALPRYN
1428 BRICKELL AVE #105
MIAMI FL 33131**

Mailing Address
**% GLENN L. HALPRYN
1428 BRICKELL AVE #105
MIAMI FL 33131**

2. Principal Place of Business
21 State, Apt. #, etc.
22 City & State
23 Zip
24 Country
25 Country

2a. Mailing Address
26 State, Apt. #, etc.
27 City & State
28 Zip
29 Country
30 Country

3. Date Incorporated or Organized **04/19/1985**
3a. Date of Last Report **03/16/1995**
4. FEI Number **59-2536931**
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
**HALPRYN, GLENN L.
1428 BRICKELL AVE
SUITE 105
MIAMI FL 33131**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.01(2)(a) and 607.01(2)(b), 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 607.01(2)(b), Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS

1. TITLE **PST**
2. NAME **HALPRYN, GLENN L.**
3. STREET ADDRESS **1428 BRICKELL AVE #105**
4. CITY, ST, ZIP **MIAMI FL**

5. TITLE
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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14. I do hereby certify that the information supplied with this filing is true and correct and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplementary 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 an addition listed with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GLENN L. HALPRYN PRESIDENT

3-25-96 (305) 371-4112

CR2E034 (12/95)