2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THE SPACE

DOCUMENT # K01500

1. Entity Name

D. GLADIS COMPANY, INC.



FILED Mar 19, 2007 08:00 A Secretary of State

Principal Place of Business

101 SOUTH STATE ROAD 7 MARGATE, FL 33068 Mailing Address

101 SOUTH STATE ROAD 7 MARGATE, FL 33068



01042007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0011222 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

GLADIS, DONALD 101 SOUTH STATE ROAD 7 MARGATE, FL 33068

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8. The above the obligat	named entity submits this statement for the plions of registered agent.	urpose of changing its registered of	ffice or r		oth, in the State of Florida.	I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title in	applicable. (NOTE: Registered Age	nt signature	required when reinstating)		DATE	
FiL After N	E NOW!!!`FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	, _□	\$5.00 May Be Added to Fees			
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PTS GLADIS, DONALD 101 SOUTH STATE ROAD 7 MARGATE, FL 33068	TORS		ή. 1	107	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 or powered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an appears, with all other like empowered.

SIGNATURE:

REGENTURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

<u>3/15/07</u>

Davime Phone #