FILE NOW: FILING FEE AFTER MAY 1 IS $225.0

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K68690** **(2)**

1. Corporation Name
GLEMJO ENTERPRISE, INC.

Principal Place of Business
1007 N. GOLF DRIVE
HOLLYWOOD FL 33021

Mailing Address
1007 N. GOLF DRIVE
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/27/1989
3a. Date of Last Report: 05/13/1994
4. FEI Number: 65-0103627 — Applied For / 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 19430 NW 8th ST
Suite, Apt. #, etc.
22 PEMBROKE PINES
City & State
23 PEMBROKE PINES
Zip 24 33029 Country 25 FL

2a. Mailing Address
26 19430 NW 8th ST
Suite, Apt. #, etc.
27
City & State
28 PEMBROKE PINES
Zip 29 33029 Country 30 FL

9. Name and Address of Current Registered Agent
JOSEPH, MARLENE
1007 N. GOLF DRIVE
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent
81 Name: MARLENE JOSEPH
82 Street Address (P.O. Box Number is Not Acceptable): 19430 NW 8th ST
83
84 City: PEMBROKE PINES FL 85 Zip Code: 33029

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 ____________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	1 1 TITLE	☐ Change ☐ Addition
NAME	GLEMAUD, JOSEPH ROBERT	1 2 NAME	
STREET ADDRESS	3779 RALEIGH ST	1 3 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD FL	1 4 CITY - ST - ZIP	
TITLE	VD	2 1 TITLE	☐ Change ☐ Addition
NAME	GLEMAUD, JEAN	2 2 NAME	
STREET ADDRESS	14800 NW 11 AVE	2 3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	2 4 CITY - ST - ZIP	
TITLE	STD	3 1 TITLE	☐ Change ☐ Addition
NAME	JOSEPH, MARLENE	3 2 NAME	
STREET ADDRESS	1007 N GOLF DR.	3 3 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD FL	3 4 CITY - ST - ZIP	
TITLE	D	4 1 TITLE	☐ Change ☐ Addition
NAME	JOSEPH, MICHELLE	4 2 NAME	
STREET ADDRESS	1007 N GOLF DR.	4 3 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD FL	4 4 CITY - ST - ZIP	
TITLE	D	5 1 TITLE	☐ Change ☐ Addition
NAME	BARON-GLEMAUD, MONIQUE	5 2 NAME	
STREET ADDRESS	14800 NW 11 AVE	5 3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	5 4 CITY - ST - ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY - ST - ZIP		6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Marlene Joseph - MARLENE JOSEPH (TREAS) 4-25-95 430-2815
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000101 CP