## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L01000003113**

THE GLORIA PROJECT, L.C.



**FILED** Apr 25, 2007 08:00 Al Secretary of State

Principal Place of Business 471 N.E. 101ST ST. MIAMI SHORES, FL 33138 Mailing Address 471 N.E. 101ST ST. MIAMI SHORES, FL 33138



04222007 No Chg-LLC

CR2E083 (11/05)

Fee Required

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4.	FEI Number		Applied For
	65-1082433		Not Applicable
5.	Certificate of Status Desired	\$5.00	Additional

6. Name and Address of Current Registered Agent

SHULMAN, STEVEN 471 NE 101 ST MIAMI SHORES, FL 33138

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	<ol><li>The above named entity submits this statement for the purpose of changing its registered office or the obligations of registered agent.</li></ol>	registered agent, or both, in the State of Florida.	I am familiar with, and accept
_	CONT. IDE		

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

000000729417 05/08/07-80035-020 50.00

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHULMAN, STEVEN M 471 NE 101 ST MIAMI SHORES, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS	

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filing toes not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information ymy signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the powered to execute this report as required by Chapter 608, Florida Statutes. 11. I hereby certify that the information supplied with this indicated on this report is true and accurate and that limited liability company

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

305-757-2020

Daytime Phone #