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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M37482

(0)

GLOW LAND CORPORATION

FILED
May 11 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address 10 NE 167 STREET C/O GOLDWYN NORTH MIAMI BEACH FL 33182 115 KENSINGTON ROAD HOLLYWOOD FL 33021-2819 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/27/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2710389 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GOLDWYN, OWEN L. Name 3800 S. OCEAN DRIVE Street Address (P.O. Box Number is Not Acceptable) 82 **SUITE 235** HOLLYWOOD FL 33019 83 City Zip Code 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent algnature required when rainstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition GOLDWYN, OWEN L NALAF 1.2 NAME 10 NE 167 STREET STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI BEACH FL CITY-ST-ZIP 1.4 CITY - ST-ZIP TITLE DELETE 2.1 TITLE Addition SHOMRONI, OFER NAME 2.2 NAME 10 NE 167 STREET STREET ADDRESS 2.3 STREET ADDRESS NORTH MIAMI BEACH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change 41 TITLE ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report to five 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 to steep 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 attactor and with in agulation.

SIGNATURE:

4/20/98

305/948-8787

2F034 (10/97)