

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000008431

FILED
Jul 03, 2003
Secretary of State

Entity Name: GLORIA'S GROUP HOME, INC

Current Principal Place of Business:

14255 S.W. 287 STREET
HOMESTEAD, FL 33032

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 161724
MIAMI, FL 33116

New Mailing Address:

FEI Number: 02-0650339 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POLANCO, GLORIA
14255 S.W. 287 STREET
HOMESTEAD, FL 33032 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POLANCO, GLORIA
Address: P.O. BOX 161724
City-St-Zip: MIAMI, FL 33116

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POLANCO, GLORIA D
Address: 14255 SW 287 STREET
City-St-Zip: HOMESTEAD, FL 33032

Title: D () Change (X) Addition
Name: RIOS, EDDY D
Address: 14255 SW 287 ST
City-St-Zip: HOMESTEAD, FL 33032

Title: D () Change (X) Addition
Name: VALENCIA, GLORIA D
Address: 14255 SW 287 ST
City-St-Zip: HOMESTEAD, FL 33032

Title: D () Change (X) Addition
Name: KALAMARAS, MARITZA D
Address: 14255 SW 287 ST
City-St-Zip: HOMESTEAD, FL 33032

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLORIA POLANCO

P

07/03/2003

Electronic Signature of Signing Officer or Director

_____ Date