

FILED
Mar 05, 2003 8:00 am
Secretary of State

03-05-2003 90035 031 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000022378

1. Entity Name
GLENN MEYERS, INC.



Principal Place of Business
**11380 PROSPERITY FARMS RD., STE. 112
PALM BEACH GARDENS, FL 33410**

Mailing Address
**11380 PROSPERITY FARMS RD., STE. 112
PALM BEACH GARDENS, FL 33410**

2. Principal Place of Business
3710 INVERARY DRIVE

3. Mailing Address
3710 INVERARY DRIVE

Suite, Apt. #, etc.
BLDG. ST. MORITZ APT 2T

Suite, Apt. #, etc.
BLDG. ST. MORITZ APT 2T

City & State
LAUDERHILL, FL. 33319

City & State
LAUDERHILL, FL. 33319

Zip Country

Zip Country

4. FEI Number
65-0991982

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**FAIRCLOUGH, MICHAEL J
11380 PROSPERITY FARMS RD., STE. 112
PALM BEACH GARDENS, FL 33410**

7. Name and Address of New Registered Agent

Name
MEYERS, DOUG

Street Address (P.O. Box Number is Not Acceptable)
3710 INVERARY DRIVE

BLDG. ST. MORITZ APT 2T

City
LAUDERHILL,

FL Zip Code
33319

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

March 1, 03

**FILE NOW!!! FEE IS \$160.00
After May 1, 2003 Fee will be \$560.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	MEYERS, DOUG
STREET ADDRESS	3710 INVERARY DR., BLDG. ST. MORITZ APT 2T
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Douglas Meyers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

March 1, 03 *954-486-0037*

CR2E034 (10/02)