2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 10, 2001 8:00 am Secretary of State **DOCUMENT # P00000105893** 1. Entity Name GLM INVESTMENTS, INC. 05-10-2001 90206 048 ***150.00 Mailing Address Principal Place of Business 5727 SW 69 COURT 5727 SW 69 COURT MIAMI FL 33143 MIAMI FL 33143 $U \approx U U U$ 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State ★ Not Applicable Country **\$8.75** Additional Zip Country П 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MASCARO, ALBERT Street Address (P.O. Box Number is Not Acceptable) 5727 SW 69 COURT **MIAMI FL 33143** Zip Code City 8. 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Leon, Leo Addition ☐ Delete TITLE LEON, LEON M NAME NAME 5727 SW 69 COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33143** Hascaro, Alberto F. TITLE Delete TITLE MASCARO, ALBERT NAME NAME STREET ADDRESS 5727 SW 69 COURT STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33143** CITY-ST-ZIE ___ Change ☐ Addition TITLE TITLE ☐ Delete GAUNAURD, MANUEL A III NAME NAME STREET ADDRESS 5727 SW 69 COURT STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33143** CITY-ST-ZIP Change ☐ Addition TITLE ☐ Detete TITLE GAUNAURD, ERIC F NAME NAME 5727 SW 69 COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33143 CITY-ST-ZIE ☐ Change Addition TITLE ☐ Delete TITLE lascaro', Jorge F. Mascaro, Jorge F. 5727 Sw Ga Ct. NAME NAME STREET ADDRESS STREET ADDRESS Miami FL. 33143 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition DIDE Delete NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 11 or Block 12 if changed, or on an attachment with an applicase with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP