FILED
Apr 29, 2002 8:00 am
Secretary of State
04-29-2002 90082 048 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000103655

1. Entity Name

F. Glen Wood, Corp.

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639903

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2. Principal Place of Business	3. Mailing Address
1000 E 23ST	1000 E 23ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City, State	City, State
Hialeah, FL	Hialeah, FL
Zip 33013 Country	Zip 33013. Country

4. FEI Number 65-1147443.

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

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7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number Not Acceptable)

City FL Zip

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 _____ (REQUIRED) Signature, typed or printed name of registered agent and title if applicable. (REQUIRED) Registered Agent signature required by authorized person.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Applied to Fees

11. OFFICERS AND DIRECTORS

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11. 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 12 if changed, added or deleted. If an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/15/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR