

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 14, 2003 8:00 am**  
**Secretary of State**

08-14-2003 90068 035 \*\*\*150.00

**DOCUMENT # P02000035267**

1. Entity Name  
**GLAMIR INTERNATIONAL, INC.**



Principal Place of Business  
**45 TAD'S TRAIL  
OLDSMAR FL 34677**

Mailing Address  
**45 TAD'S TRAIL  
OLDSMAR FL 34677**



2. Principal Place of Business  
**1801 E Lake Rd.**

3. Mailing Address  
**1801 E Lake Rd.**

Suite, Apt. #, etc.  
**Apt. 13-A**

Suite, Apt. #, etc.  
**Apt 13-A**

City & State  
**Palm Harbor, FL**

City & State  
**Palm Harbor, FL**

Zip  
**34685**

Zip  
**34685**

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number  
**Pending**

☒ Applied For  
☐ Not Applicable

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

## 6. Name and Address of Current Registered Agent

**AFRICANO, ADELA  
45 TAD'S TRAIL  
OLDSMAR FL 34677**

## 7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
**PD** ☒ Delete  
NAME  
**DETERNOZ, ANA CECILIA**  
STREET ADDRESS  
**45 TAD'S TRAIL**  
CITY-ST-ZIP  
**OLDSMAR FL 34677**

TITLE  
**President** ☒ Change ☐ Addition  
NAME  
**Luz Marina Rodriguez**  
STREET ADDRESS  
**1801 E Lake Rd. Apt 13-A**  
CITY-ST-ZIP  
**Palm Harbor, FL 34685**

TITLE  
**VD** ☐ Delete  
NAME  
**RODRIGUEZ, LUZ MARINA** *Change to President*  
STREET ADDRESS  
**45 TAD'S TRAIL**  
CITY-ST-ZIP  
**OLDSMAR FL 34677**

TITLE  
**Vice-President** ☒ Change ☐ Addition  
NAME  
**Guido A. Alizo**  
STREET ADDRESS  
**1801 E Lake Rd. Apt 13-A**  
CITY-ST-ZIP  
**Palm Harbor, FL 34685**

TITLE  
**SD** ☐ Delete  
NAME  
**ALIZO, GUIDO A** *Change to Vice-President*  
STREET ADDRESS  
**45 TAD'S TRAIL**  
CITY-ST-ZIP  
**OLDSMAR FL 34677**

TITLE  
**General Manager** ☐ Change ☒ Addition  
NAME  
**Ahmed Dandache**  
STREET ADDRESS  
**3450 Palencia Drive, Apt 1713**  
CITY-ST-ZIP  
**Tampa, Florida 33618**

TITLE  
**TD** ☒ Delete  
NAME  
**FERNANDEZ, MORELLA**  
STREET ADDRESS  
**45 TAD'S TRAIL**  
CITY-ST-ZIP  
**OLDSMAR FL 34677**

TITLE  
**Secretary / Treasurer** ☐ Change ☒ Addition  
NAME  
**Juan Carlos Alizo**  
STREET ADDRESS  
**1801 E Lake Rd Apt 13-A**  
CITY-ST-ZIP  
**Palm Harbor, FL 34685**

TITLE  
☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
☐ Change ☐ 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**08/10/03 127 7761007**

Date

Daytime Phone #

CR2E034 (4/03)

Attachment# 80138415

Montes de Oca, Montserrat and Associates  
2910 W. Waters Ave., Tampa, FL 33614  
813-244-2588 / 842-4717

August 7, 2003

Florida Department Of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: FEI Number: Pending / Applied For  
Entity Name: Glamir International, Inc  
Document #: P02000035267

Dear Sirs:

This letter is to respectfully request a waiver of the penalty fee applied to our client, Glamir International, Inc. Our request is based on the fact that our client did not receive the first filing notice of the 2003 UBR.

Enclosed please file a check in the amount of \$150,00 corresponding to the original filing fee.

If you have any questions or would like to discuss this matter further, please contact us at 813-244-2588 or 842-4717.

Thank you for your prompt attention to this request.

Sincerely,

*Maria T. Montserrat*  
Maria T. Montserrat

Encl.

cc. G. Alizo