


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 08, 2003 8:00 am**  
**Secretary of State**

09-08-2003 90318 041 \*\*\*550.00

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AV

<b>DOCUMENT #</b> P02000038634	
<b>1. Entity Name</b> GLORIA & CARLOS, INC.	

<b>Principal Place of Business</b> 1178 NW 125 CT MIAMI FL 33182	<b>Mailing Address</b> 1178 NW 125 CT MIAMI FL 33182
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<b>2. Principal Place of Business</b> 12698 NW 11th Ln	<b>3. Mailing Address</b> 12698 NW 11th Ln
Suite, Apt. #, etc.	Suite, Apt. #, etc.

<b>City &amp; State</b> Miami Florida	<b>City &amp; State</b> Miami Florida
<b>Zip</b> 33182	<b>Country</b> USA
<b>Zip</b> 33182	<b>Country</b> USA

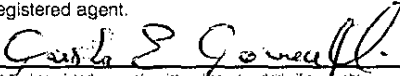
<b>4. FEI Number</b> 01-0710064	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>



☒ CHECK HERE IF MAKING CHANGES

<b>6. Name and Address of Current Registered Agent</b>  CORREA, CARLOS 1178 NW 125 CT MIAMI FL 33182
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<b>7. Name and Address of New Registered Agent</b>  Name: Correa, Carlos E. Street Address (P.O. Box Number is Not Acceptable): 12698 NW 11th Ln. City: Miami FL Zip Code: 33182
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<b>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.</b>	
SIGNATURE: 	DATE: 09-04-03

<b>FILE NOW!!! FEE IS \$550.00</b> <b>After September 10, 2003 Fee will be \$750.00</b> <b>Make Check Payable to Florida Department of State</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
<b>TITLE</b> PD <b>NAME</b> CORREA, CARLOS E <b>STREET ADDRESS</b> 1178 NW 125 CT <b>CITY-ST-ZIP</b> MIAMI FL 33182	<input type="checkbox"/> Delete
<b>TITLE</b> VD <b>NAME</b> CORREA, GLORIA C <b>STREET ADDRESS</b> 1178 NW 125 CT <b>CITY-ST-ZIP</b> MIAMI FL 33182	<input type="checkbox"/> Delete
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> PD <b>NAME</b> CORREA CARLOSE <b>STREET ADDRESS</b> 12698 NW 11th Ln <b>CITY-ST-ZIP</b> Miami FL 33182	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> VD <b>NAME</b> CORREA, GLORIA C. <b>STREET ADDRESS</b> 12698 NW 11th Ln <b>CITY-ST-ZIP</b> Miami FL 33182	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**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.**

<b>SIGNATURE:</b> 	<b>DATE:</b> 09-04-03 <b>DAYTIME PHONE #:</b> (786) 2713510
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	

CR2E034 (4/03)