
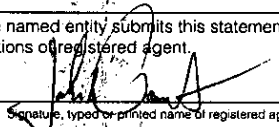
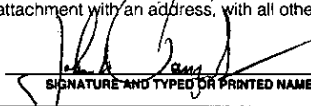


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90325 037 ***150.00

DOCUMENT # P02000051943 1. Entity Name GLAMOUR ENTERPRISES, INC.					
Principal Place of Business 1234 S. DIXIE HWY STE #329 MIAMI, FL 33146			Mailing Address 1234 S. DIXIE HWY STE #329 MIAMI, FL 33146		
2. Principal Place of Business 3111 Grand Avenue Suite, Apt. #, etc.		3. Mailing Address 3111 Grand Avenue Suite, Apt. #, etc.			
City & State Coconut Grove FL Zip 33133 Country		City & State Coconut Grove FL Zip 33133 Country		4. FEI Number 01-0685398 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				04282004 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent AGUILERA, DOMINIQUE P 1234 S. DIXIE HWY STE #329 MIAMI, FL 33146			7. Name and Address of New Registered Agent Name Aguilera, Dominique P Street Address (P.O. Box Number is Not Acceptable) 3111 Grand Avenue City Coconut Grove FL Zip Code 33133		
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  DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP AGUILERA, DOMINIQUE P <input type="checkbox"/> Delete 1234 S. DIXIE HWY STE #329 MIAMI, FL 33146		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Aguilera, Dominique P 3111 Grand Avenue Coconut Grove FL, 33133	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GONZALEZ, GEORGINA <input type="checkbox"/> Delete 1234 S. DIXIE HWY STE #329 MIAMI, FL 33146		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Gonzalez, Georgina 3111 Grand Avenue Coconut Grove FL, 33133	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS PAUZAT, JOHN L <input type="checkbox"/> Delete 1234 S. DIXIE HWY STE #329 MIAMI, FL 33146		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Paizat, John L 3111 Grand Avenue Coconut Grove FL, 33133	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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.					
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date _____ Daytime Phone # _____					