2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000064577

Entity Name: GLORY CAB INC.

FILED Mar 28, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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7325 NORTH MIAMI AVENUE 331 NE 180TH DR

MIAMI, FL 33150 N MIAMI BEACH, FL 33162

Current Mailing Address: New Mailing Address:

545 121ST 204 NE 26TH ST

MIAMI, FL 33161 POMPANO BEACH, FL 33064

FEI Number: 04-3702870 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POWER, MEUS POWER, MEUS 545 NE 121 ST 204 NE 26TH ST

MIAMI, FL 33181 US POPANO BEACH, FL 33064 US

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: POWER MEUS 03/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 MEUS, POWER SR.
 Name:
 MEUS, POWER SR.

 Address:
 545 NE 121ST
 Address:
 204 NE 26TH ST

City-St-Zip: MIAMI, FL 33181 City-St-Zip: POMPANO BEACH, FL 33064

Title: PCEO (X) Delete Title: () Change () Addition

 Name:
 LYFAITE, ALEXIS
 Name:

 Address:
 11120 SPRINGFIELD PL
 Address:

 City-St-Zip:
 COOPER CITY, FL 33026
 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition

 Name:
 PETIT-FIERE, JOSEPH
 Name:

 Address:
 114 NW 98 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33150
 City-St-Zip:

Title: S (X) Delete Title: () Change () Addition

 Name:
 PAUL, PHANOR O
 Name:

 Address:
 1620 NW 128 ST
 Address:

 City-St-Zip:
 MIAMI, FL 33168
 City-St-Zip:

Title: P (X) Delete Title: () Change () Addition

 Name:
 JEAN-GABRIEL, PETIT-FOND
 Name:

 Address:
 1180 NW 120 ST
 Address:

 City-St-Zip:
 MIAMI, FL 33168
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: POWER MEUS P 03/28/2006