

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 20, 2003 8:00 am
Secretary of State

02-20-2003 90135 023 ***150.00

DOCUMENT # P02000070268

1. Entity Name
GLENN GOBIN, INC.



Principal Place of Business
**7041 GRAND NATIONAL DR STE 214
ORLANDO, FL 32819**

Mailing Address
**7041 GRAND NATIONAL DR STE 214
ORLANDO, FL 32819**

2. Principal Place of Business
4700 W Irlo Bronson Mem Hwy

3. Mailing Address
4700 W Irlo Bronson Mem Hwy

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Kissimmee, Florida

City & State
Kissimmee, Florida

Zip
34746

Country
USA

4. FEI Number
04-3696110

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
**GOBIN, GLENN
7041 GRAND NATIONAL DR STE 214
ORLANDO, FL 32819**

7. Name and Address of New Registered Agent
Name
GLEN GOBIN
Street Address (P.O. Box Number is Not Acceptable)
3120 Stonehurst Circle
City
Kissimmee **FL** Zip Code
34741

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 *Glenn Gobin* **2/17/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when missing) DATE

FILE NOW! FEE IS \$150.00
May 1, 2003 12:00 PM
Make check payable to Florida Department of State

9. Election Campaign Financing: ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	☐ Delete GOBIN, GLENN 7041 GRAND NATIONAL DR STE 214 ORLANDO, FL 32819	TITLE P	☒ Change ☐ Addition GLEN GOBIN 3120 Stonehurst Circle Kissimmee, FL 34741
TITLE D	☐ Delete GOBIN, RIANTEE M 7041 GRAND NATIONAL DR STE 214 ORLANDO, FL 32819	TITLE VP	☒ Change ☐ Addition Riantee Gobin 3120 Stonehurst Circle Kissimmee, FL 34741
TITLE 	☐ Delete	TITLE 	☐ Change ☐ Addition
TITLE 	☐ Delete	TITLE 	☐ Change ☐ Addition
TITLE 	☐ Delete	TITLE 	☐ Change ☐ Addition
TITLE 	☐ Delete	TITLE 	☐ Change ☐ 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: *Glenn Gobin* **2/17/03**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)