## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000134323

Entity Name: GLAZER ENTERPRISES, INC.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

790 E. BROWARD BLVD. 915 MIDDLE RIVER DRIVE

301 SUITE 311

FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33304

Current Mailing Address: New Mailing Address:

790 E. BROWARD BLVD. 915 MIDDLE RIVER DRIVE

SUITE 311

FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33304

FEI Number: 05-0551703 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:

GLAZER, ANA MARIE

790 E BROWARD BLVD

915 MIDDLE RIVER DRIVE

SUITE 301 SUITE 311

FORT LAUDERDALE, FL 33301 US FORT LAUDERDALE, FL 33304 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: ANN MARIE GLAZER 03/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: PRES (X) Change ( ) Addition Name: GLAZER, ANN MARIE Name: GLAZER, ANN MARIE

Address: 790 E BROWARD BLVD, SUITE 301 Address: 915 MIDDLE RIVER DRIVE, SUITE 311

City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33304

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

Name: Name: GLAZER, JEFF

Address: Address: 915 MIDDLE RIVER DRIVE, SUTIE 311
City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33304

I hereby certify that the information supplied with this filing does not qualify 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: JEFF GLAZER VP 03/23/2009