

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008 8:00 am
Secretary of State

03-13-2008 90043 021 ***150.00

DOCUMENT # P04000042301

1. Entity Name
GLAMOUR 24/7, INC.



Principal Place of Business
405 5TH AVENUE SOUTH
SUITE 9
NAPLES, FL 34102

Mailing Address
405 5TH AVENUE SOUTH
SUITE 9
NAPLES, FL 34102

2. Principal Place of Business - No P.O. Box #
3838 TAMiami TRAIL NORTH

3. Mailing Address
3838 TAMiami TRAIL NORTH

Suite, Apt. #, etc.
SUITE 200

Suite, Apt. #, etc.
SUITE 200

02072008

Chg-P

CR2E034 (12/06)

City & State NAPLES, FL

City & State NAPLES, FL

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip
34103-0496

Country
US

Zip
34103-4096

Country
US

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

6. Name and Address of Current Registered Agent

GOLD, SAMUEL C ESQUIRE
405 5TH AVENUE SOUTH
SUITE 9
NAPLES, FL 34102

7. Name and Address of New Registered Agent

Name HILL, BARTH & KING LLC

Street Address (P.O. Box Number is Not Acceptable)
3838 TAMiami TRAIL NORTH

SUITE 200

City NAPLES

FL

Zip Code 34103

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 Cynthia Pisani CYNTHIA PISANI FOR HILL, BARTH & KING LLC

3/3/08
DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME ALLEN, SALLY
STREET ADDRESS 7-13 BERGHEM MEWS, BLYTHE ROAD
CITY-ST-ZIP LONGDON W14 0HN, ENGLAND,

TITLE D ☐ Delete
NAME GERARD, NORMAN
STREET ADDRESS THE PRIORY, DENHAM VILLAGE
CITY-ST-ZIP BUCKS UB9 5AS ENGLAND,

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME GLAMOUR2GO LTD. BRACKENWOOD
STREET ADDRESS DUKES KILN DRIVE, GERRARD'S CROSS
CITY-ST-ZIP BUCKS, SL9, 7HD, ENGLAND

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 #