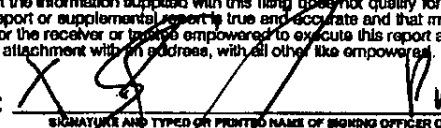


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000087755		
1. Entity Name GLAMEXICO, INC.		
Principal Place of Business 1001 BRICKELL BAY DR STE 3112 MIAMI, FL 33131		Mailing Address 1001 BRICKELL BAY DR STE 3112 MIAMI, FL 33131
DO NOT WRITE IN THIS SPACE		
		04042008 No Chg-P CR2E034 (11/05)
		4. FEI Number 20-2651585
		Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent PERLMAN, GEORGE D 1001 BRICKELL BAY DR STE 3112 MIAMI, FL 33131		DO NOT WRITE IN THIS SPACE
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 _____ (NOTE: Registered Agent signature required when reappointing) Signature, typed or printed name of registered agent and title if applicable. DATE _____		
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 NAME STREET ADDRESS CITY-ST-ZIP	PSD GLASWAND, SIMONE 1001 BRICKELL BAY DR STE 3112 MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GLASWAND, HERMAN 1001 BRICKELL BAY DR STE 3112 MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 110, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 empowerments.		
SIGNATURE:  Pres.		4/11/08 Date _____ Daytime Phone # _____