2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

LII LD

20043815

May 03, 2006 8:00 am Secretary of State
05-03-2006 90237 012 ***150.00

DOCUMENT # P04000135425 1. Entity Name GLENDALE PROPERTIES & INVESTMENTS INC. Principal Place of Business Mailing Address 3540 N W 50TH AVE P 0 BOX 15924 SUITE K-119 PLANTATION, FL 33318 LAUDERDALE LAKES, FL 33319 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip -Country Zip Country 6. Name and Address of Current Registered Agent Name DALEN, JESSE, 💖 3540 N W 50TH AVE STGE K-119 Street Address (LAUDERDALE LAKES, FL 33319

LAUDERDALE LAKES, FL 33319				A INTRINCUL TO BOURD BURN BORN BEHIL BOURD BURN WHEN DINN BRAID WERE BURNEL OF URSA		
2. Principal Place of Business		3. Mailing Address		****		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			05012006 Chg-P CR2E	034 (11/05)
City & State		City & State			4. FEI Number Appli	
					81-0655625	Not Applicable
Zip	Country	Zip			5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
DALEN, JESSE 3540 N W 50TH AVE STGE K-119 LAUDERDALE LAKES, FL 33319				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above na		ent for the purpose of char	nging its register	L ed office or re		familiar with, and accept

DATE

9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition GAYLE, LUTHER W NAME NAME STREET ADDRESS 3540 N W 50TH AVE STE K-119 STREET ADDRESS CITY-ST-ZIP LAUDERDALE LAKES, FL 33319 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition DALEN, JESSE C NAME NAME 3540 N W 50TH AVE STE K-119 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAUDERDALE LAKES, FL 33319 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

(NOTE: Registered Agent signature required when reinstating)

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 receiper or trustee empowhed 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 attachmyn with an address, with all other the empowered.

SIGNATURE:

the obligations of registered agent.

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

SIGNATURE.

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

20

954-484-69 00