2006 FOR PROFIT CORPORATION 3. Se

FILED Mar 28, 2006 8:00 am Secretary of State

MeST PALM BEACH, FL 33415 US WEST PALM BEACH, FL 33415 WEST PALM BEACH B	DOCUMENT # P05000065070 1. Erkily Name GLORIA FORMS SERVICES, INC							03-09-20	06 90154 023	***150.00	
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Suite Apt # 95. Suite	4792- B ORLEANS CT 4792- B ORLEANS CT					s us		(6007381		
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Section Sect	Suite, Apt.	#. etc.					03042006	Chg-P	CR2E034 (11/0	5)	
S. Name and Address of Current Registered Apart 7. Name and Address of New Registered Apart 7. Name and Address of New Registered Apart 8. The above named entity submits the statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Ronda. I am femiliar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am femiliar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am femiliar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am femiliar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am femiliar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am femiliar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am femiliar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am femiliar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am femiliar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am femiliar with, and accept the Rondard agent agent agent or registered agent, or both, in the State of Ronda. I am femiliar with, and accept the Rondard agent agent or registered agent, or both, in the State of Rondard agent agent or registered agent, or both, in the State of Rondard agent ag	City & State			City & State			2FELNumber	7557	156 H	, , , , , , , , , , , , , , , , , , , ,	
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BASTIDAS, GLORIA E 4792-B ORLEANS CT WEST PALM BEACH, FL 33415 City FL Zip Code		6. Name	and Address of Current	Registered Agent	d		7. Name and	Address of New R			
Street Accidences (P.O. Boot Number is Not Accoptable) City	BASTIDAS	GI OPIA		·	-Natte-W-/	*					
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 Roida. 1 am familiar with, and accept the obligations of registered agent, or both, in the State of Roida. 1 am familiar with, and accept the obligations of registered agent, or both, in the State of Roida. 1 am familiar with, and accept the obligations of registered agent agent and at registered agent, or both, in the State of Roida. 1 am familiar with, and accept the Obligations of registered agent, or both, in the State of Roida. 1 am familiar with, and accept the Obligations of registered agent, or both, in the State of Roida. 1 am familiar with, and accept the Obligations of registered agent, or both, in the State of Roida. 1 am familiar with, and accept the Obligations of Roidan (1) and 1 am familiar with, and accept the Obligations of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept the Obligation of Roidan (1) and 1 am familiar with, and accept agent and 1 am familiar with, and accept agent agent and 1 am familiar with an accept and 1 am familiar with a accept and 1 am familiar w	4792-B ORLEANS CT					Street Address (P.O. Box Number is Not Acceptable)					
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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 13, 2006

GLORIA FORMS SERVICES, INC 4792- B ORLEANS CT WEST PALM BEACH, FL 33415 US

Subject: GLORIA FORMS SERVICES, INC

Reference Number:

P05000065070

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION