2007 FOR PROFIT CORPORATION

SIGNATURE:

## **FILED** Apr 09, 2007 8:00 am Secretary of State **ANNUAL REPORT (AR)** DOCUMENT # P05000072122 1. Entity Name 04-09-2007 90048 029 \*\*\*163.75 GL PROPERTY MAINTENANCE, INC. Principal Place of Business Mailing Address 1324 NW 5TH AVE, APT 2 1324 NW 5TH AVE, APT 2 FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 176 NW 48AVE 76 NW 48 AV Suite, Apt. #, etc 1st MOORE CR2E034 (10/06) auderda auderda 4. FEI Number Applied For 55-0896468 Not Applicable Country Zip Country \$8.75 Additional Certificate of Status Desired. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LOUIS, GUITO our's 1324 NW 5TH AVE, APT 2 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33311 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 Signature, typed or printed name of regis nt and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE ☐ Addition Louis Guito LOUIS, GUITO NAME 4176 NW 48 Ave Landerdele LAKES 1324 NW 5TH AVE, APT 2 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33311 CITY-ST-7LP CITY-SI-7IP THILE Delete THILE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-7IP CITY - ST - ZIP Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAMI STREET ADDRESS STREET ADDRESS CIJY-S1-ZIP CITY-SI-ZIP HILE 11111 ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY-S1-716 CITY-S1-ZIP TITLE THILE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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