FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00 PROFIT FLORIDA DEPARTMEN OF STATE CORPORATION

ANNUAL REPORT



Sandra B. Mort Secretary of St

ATIONS

DIVISION OF CORPO

1996

	MENT# P940	00090107 (1)			
1. Corporation	Hallie	(,	'			
GLU	BAL GALLERY, INC.			1 100114011 110 10111 10111 10111	laile Baile Adith chail dhean dhean 1861 agist 1861 tan	
Principal Place of Business Mailing Address					BRINK BOUN BOND HOLK BOND LIDIN BONK IND A	
3408 NORTH MIAMI AVENUE 3408 NORTH MIAMI AV			/ENUE			
MIAMI FL	33127	MIAMI FL 33127				
				3. Date Incorporated or Qualified	3a. Date of Last Report	
9 Principal Pi	ace of Business	0- M-3		01/01/1995		
21 21	ace of business	2a. Mailing Address		4. FEI Number 65-054541	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	55.00 May Be	
23	0	28		Trust Fund Contribution	Added to Fees	
Ζφ 24	Country 25	Zip 29	Country 30	This corporation has liability for Florida Statutes	rintangible tax under s. 199.032, s. 🌅 No	
	9. Name and Address of Curre		10. Name and Address of New Registered Agent			
81 Name				Hertzbach, Jax		
HERTZBACH, JAY			82 Street	Address (P.O. Box Number is Not Accepta	blg)	
3408 NORTH MIAMI AVENUE			100	025 SW 112 ave , .	# 110	
MIAMI	FL 33127		83	·		
			84 City /	niami	FL 85 ZD Code 33/7 (a	
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,		orporation submits this statement for the pu- board of directors. I hereby accept the app		
or register familiar wit	ed agent, or both, in the State of Flori th, and accept the obligations of, Sec	ida. Such change was authorized tion 607.0505, Florida Statutes.	by the corporation's	board of directors. I hereby accept the app	pointment as registered agent. I am	
SIGNATURE .						
12.	Signature, typed or printed name of registered agen	it and title if applicable. (NOTE: ID DIRECTORS	Registered Agent signature re	· · · · · · · · · · · · · · · · · · ·	DATE	
TITLE	PTD	DELETE	13.	ው r D	FICERS AND DIRECTORS IN 12 Thange Addition	
NAME	HERTZBACH, JAY		1.2 NAME	Hertzbach, Jay 10625 SW 112 avc., +	Luc	
STREET ADDRESS	2270 S.W. 28TH STREET		1.3 STREET ADDRESS	10625 SW 112 avc., +	1110	
C(1) Y - S1 - Z(P	MIAM! FL 33131		14 CHTY - ST - ZIP	mlami, FL 331	76.	
TITLE	SD	DELETE	2 1 THTLE		Change Addition	
NAME	HERTZBACH, JUDITH		22 NAME			
STREET ADDRESS	2270 S.W. 28TH STREET		23 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33131		2.4 CITY - ST - ZIP			
THLE		☐ DELETE	3. 1 TITLE	V/S	Change Addition	
NAME			3.2 NAME	Hertzbach, Monico 10625 Sw 112 are,	£ no	
STREET ADDRESS			3 3. STREET ADDRESS	10625 500 112 412,	~ /	
CITY-ST-ZIP TITLE		DELETE	3.4 CITY - ST - ZIP	miami, FL 331		
NAME		C) perest	4. 1 TITLE		Change Addition	
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS			
CITY - ST - ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5. 1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY-ST-ZIP			
TOLE		☐ DELETE	6 1 TITLE		Change Addition	
NAME			62 NAME			
STREET ADDRESS			63 STREET ADDRESS			
CITY-ST-ZIP			64 CITY-ST-ZIP			

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 of Block 13 of Block 14 of Block 14 of Block 15 of Blo

SIGNATURE

INTED NAME OF SIGNING OFFICER OR DIRECTOR

954704-9704

CR2E034 (12/95)