

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Moogham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000043041 (9)

1. Corporation Name  
GLORY INTERNATIONAL CORPORATION

REC'D SEP 12 AM 11:31

FLORIDA DEPARTMENT OF STATE



Principal Place of Business

Mailing Address

955 BAY DRIVE  
NO. 8  
MIAMI BEACH FL 33141

955 BAY DRIVE  
NO. 8  
MIAMI BEACH FL 33141

2. Principal Place of Business

21 955 BAY DR. #8

Suite, Apt. #, etc.

22 #8

City & State

23 MIAMI BEACH FL

Zip

24 33141

Country

25 DADE

2a. Mailing Address

26 955 Bay Dr.

Suite, Apt. #, etc.

27 #8

City & State

28 MIAMI BEACH FL

Zip

29 33141

Country

30 DADE

9. Name and Address of Current Registered Agent

MANZANO, GLORIA E  
955 BAY DRIVE  
NO. 8  
MIAMI BEACH FL 33141

3. Date Incorporated or Qualified 06/02/1995	3a. Date of Last Report 06-02-95
4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

10. Name and Address of New Registered Agent

81 Name GLORIA MANZANO
82 Street Address (P.O. Box Number is Not Acceptable) 955 Bay Dr. Apt 8
83
84 City MIAMI BEACH
85 Zip Code FL 33141

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed in ink of registered agent or the corporation

(Note: Registered Agent's signature required when renewing)

DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MANZANO, GLORIA E 955 BAY DRIVE NO. 8 MIAMI BEACH FL 33141	<input type="checkbox"/> DELETE 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

14. 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *S. Manzano*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09-02-96 President

CR2E034 (3/96)