FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 24, 1999 8:00 am Secretary of State

05-24-1999 90006 016 ***150.00

DOCUMENT #	P95000092522	(8) 🗸
1. Corporation Name		()

1. Corporation	on Name									
GLM 7	TRADING OF MIAMI,	INC.								
Data de al Dia	- t During	Mailing A		.			_			
Principal Plac	ce of Business	Mailing A	aaress							
6065 N	NW 167TH ST.	6065	NW 167	TH ST	г.					
UNIT H	UNIT B 15 UNIT B 15						DO NOT WRITE IN THIS SPACE			
MIAMI, FL. 33015 MIAMI, FL. 3			33015	5		3. Date Incorporated or Qualifed				
							12/04/1995			
2. Principal !	Place of Business	2a. Mailin	g Address				4. FEI Number		— — — — — — — — — — — — — — — — — — —	plied For
21		26					65-0629132	-		t Applicable
Suite, Apt	#, etc.	— ·	Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A Fee Red	1
22 City 9 Ct	<u> </u>	27 City 8	State				S Starting Committee Signature			
City & Sta	ne	28	State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 to Added to	
23 Zip	Country	Zip		Coun	itrv		This corporation owes the curr	ent vear Inte		01663
24	25	29		30	,		Personal Property Tax.	ciit year iiite	3.2	□No
24	9. Name and Address of Current		Agent	1901			10. Name and Address of New I	Registered A	Agent	
		<u> </u>	<u>.</u>		81	Name				
PAREJ	JA, CARLOS			.		<u> </u>	(D.O. Day Number is Net Assert	-hla)		
	NW 167TH ST. UNI	г в 15		'	82	Street Addr	ess (P.O. Box Number is Not Accepta	able)		
MIAM]	r, FL. 33015			ļī.	83					
				Ļ					T=1 = 2	<u> </u>
				[84	City		FL	85 Zip C	Lode
11. Pursuan	t to the provisions of Sections 607.050	2 and 607.150	8, Florida Statu	tes, the ab	ove	-named corp	oration submits this statement for the	purpose of	changing its	registered
office or	registered agent, or both, in the State am familiar with, and accept the obligat	of Florida, Suc	h change was a	authorized I	bv t	the corporatio	on's board of directors. I hereby accep	pt the appoir	tment as reg	gistered
	/	,0.12 01, 00010	,, 001,0000, 110							
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicab	le. (NOTE	Registered A	gent	t signature required	d when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS	·	13.			ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	P/D		☐ DELETE	1.1 TITL	Æ				Change	Addition
NAME	PAREJA, CARLOS			1.2 NAW						
STREET ADDRESS	6065 NW 167TH ST	. UNIT	B 15	13 STREE		ADDRESS				
CITY-ST-ZIP	MIAMI, FL. 33015			14 CITY		-ZIP				- Addition
TITLE	V/D		□ DELETE	2.1 TITL					Change	☐ Addition
NAME	LOPEZ, GLADYS			2.2 NAM						
STREET ADDRESS	6065 NW 167TH ST	. UNIT	B 15	2.3 STR	EET,	ADDRESS				}
CITY-ST-ZIP	MIAMI, FL. 33015		D DELETE	2. 4 CIT		f-ZiP			[] Change	Addition
TITLE			☐ DELETE	3 1 TITL					Change	☐ Addition
NAME				32 NAM						
STREET ADDRESS	§					ADDRESS				
CITY-ST-ZIP			☐ DELETE	3 4. CIT		1-Z1P			[] Change	Addition
TITLE			_ DECETE	H					L_J ondingo	
NAME				4 2 NAN		LODDEGG				
STREET ADDRESS	5					ADDRESS				
CITY-ST-ZIP			☐ DELETE	5 1 TITL		-Z)P			Change	Addition
TITLE				5.2 NAM					9-	_
NAME OXDEET ADDRESS				II.		ADDRESS				
STREET ADDRESS				5.4 CITY						
CITY-ST-ZIP TITLE	-		DELETE	6.1 TITL		- 131			Change	Addition
				6.2 NAM						_
NAME						ADDRESS				ļ
STREET ADDRESS	>]			11 33311						

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (11/98)