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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000031885 (2)

GLORIA J. MILLS, INC.

Principal Place of Business

Mailing Address

FILED
May 06 1997 8:00am
Secretary of State



4608 W. LONGF TAMPA FL 3362	ELLOW AVENUE	4808 W. LONGFELLOW TAMPA FL 33629-7625	AVENUE		
				3. Date Incorporated or Qualified 04/11/1996	3a. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21 42	54 Henderson	B/126 4608 W	Lance Colla	v 59-3316	Not Applicable
Suite, Apt 4	#, etc.	Suite, Apt #, etc.	LONG TO		CO 75
22		27		5. Certificate of Status Desired	Fee Required
City & State	)	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
$\frac{23}{Z_{10}}$ $\alpha n$	1pa Fl Country	28 Tampa	F1 33 Country	629 Trust Fund Contribution	Added to Fees
24 3362	9. Name and Address of C	Just 29 33(20	j 30	Florida Statutes	or intangible tax under s. 199.032,  Yes X No
		nremi Hegistereo Agent	81 Nam	10. Name and Address of New I	legistered Agent
	S, GLORIA J	N IP	joi ivaiii	8	
4608 WEST LONGFELLOW AVENUE TAMPA FL 33629			82 Stree	et Address (P.O. Box Number is Not Accept	able)
			83		
			84 City		FL 65 Zip Code
11. Pursuant t	n the provisions of Sections 60	7 0502 and 607 1509. Florida Sta	tutes the above name	ed corporation submits this statement for the	
office or re	eg stered agent or both, in the	State of Florida, Such change w	as authorized by the co	orporation's board of directors. I hereby acc	ept the appointment as registered
agent Lar	n familiar with, and accept the i	obligations of, Section 607.0505,	Florida Statutes.	·	·
SIGNATURE	Charles to the spiritual annual of source	and account and the off the officers of	OTE B. d		
	Signature, typod or printed name of register		NOTE: Registered Agent signat		DATE
12.	OFFICERS	AND DIRECTORS	13.		ICERS AND DIRECTORS IN 12
12. The	OFFICERS <b>D</b>		13. 1.1 TITLE		
12. THE NAME	D MILLS, GLORIA J	S AND DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
12. THE NAME SINEET ADDRESS	OFFICERS D MILLS, GLORIA J 4608 WEST LONGFELLOW	S AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
12. THE NAME STREET ADDRESS CITY: ST-ZIP	D MILLS, GLORIA J	S AND DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12 Change Addition
12. THE NAME STREET AUDRESS CITY ST-ZIP THE	OFFICERS D MILLS, GLORIA J 4608 WEST LONGFELLOW	S AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES: 1.4 CITY - ST- ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
12. THEE NAME STREET AUDRESS CITY-ST-ZIP THEE NAME	OFFICERS D MILLS, GLORIA J 4608 WEST LONGFELLOW	S AND DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES: 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12 Change Addition
12. TITLE NAME STREET ACORESS CITY: ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS D MILLS, GLORIA J 4608 WEST LONGFELLOW	S AND DIRECTORS  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12 Change Addition
TIRE NAME STREET ACORESS CITY: ST-ZIP TITLE NAME STREET ADORESS CITY: ST-ZIP	OFFICERS D MILLS, GLORIA J 4608 WEST LONGFELLOW	AVENUE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES: 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES: 2.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition
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TILE NAME SIMET ACCRESS CITY: ST-ZIP TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE NAMI STREET ADDRESS	OFFICERS D MILLS, GLORIA J 4608 WEST LONGFELLOW	AVENUE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES: 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES: 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition
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12. THE NAME SINEET ACORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAMI SINEET ADDRESS CITY-ST-ZIP TITLE THE	OFFICERS D MILLS, GLORIA J 4608 WEST LONGFELLOW	AVENUE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition  Change Addition  Change Addition
TIZ. THE NAME STREET ACRESS CITY ST-ZIP THEF NAME STREET ADDRESS CITY-ST-ZIP THEF NAMI STREET ADDRESS C-TY-ST-ZIP THEE NAME	OFFICERS D MILLS, GLORIA J 4608 WEST LONGFELLOW	AVENUE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition  Change Addition  Change Addition
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TILE NAME SINELLAUDHESS CITY-ST-ZIP TITLE NAME STREELADDRESS CITY-ST-ZIP TITLE NAMI STREELADDRESS CITY-ST-ZIP TITLE NAME STREELADDRESS CITY-ST-ZIP TITLE NAME STREELADDRESS CITY-ST-ZIP TITLE THE	OFFICERS D MILLS, GLORIA J 4608 WEST LONGFELLOW	AVENUE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4. CITY-ST-ZIP  4.1 TITLE  4. 2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition  Change Addition  Change Addition
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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; the lam an officer or director of the corporation or the receiver or trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if shanged, or on an apachmont with a paddress.

SIGNATURE

NATURE AND TYPED ON PRINTED NAME OF BIONING OFFICER OR DIRECTOR

CR2E034 (9/5