SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #
1. Corporation Name

P96000055773 (1)

FILED Jul 09 1998 8:00am Secretary of State

GLOAR,	INC.					
Principal Plac	e of Bus iness	Mailing Address			T DEBATERA DIA LANG ANAD ARAD ARAD ARAD ARAD ARAD ARAD ARAB ARAB	HEIBI BINDL DILIL SABAN HANDO TANI 1091
13312 S.W. 61ST STREET MIAMI FL 33183		13312 S.W. 61ST STREET MIAMI FL 33183		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address					07/02/1996	
	N.W. 157 Ave	2a. Mailing Address	٦		4. FEI Number	Applied For
Suite, Apt.		Suite Apt # etc	Suite, Apt. #, etc.		65-0680797	Not Applicable \$8.75 Additional
22	27	•		5, Certificate of Status Desired	Fee Required	
City & Stat		City & State	ity & State		6. Election Campaign Financing	\$5.00 May Be
23 Pemi	broke Pines, Fl	28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	y	8. This corporation owes or has paid the	
24 330			30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent	81	I Nome	10. Name and Address of New Registe	red Agent
MS. MARITZA CORAL				Name	Same	
13312 S.W. 61ST STREET			82	82 Street Address (P.O. Box Number is Not Acceptable)		
MIAN	MI FL 3 3183		83	157	IN.W. ISTAVE	
			84	City	to be Piece	FL 85 Zip Code 33028
11. Pursuant	to the provisions of sections 607 0502	and 607 1508 Florida Statutos	the above	pamed co		
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. t am familiar with, and accept the obligations of, section 607.0505, Florida Statutés.						
SIGNATURE	Signature, typed or printed hame of registered agent a	and title if applicable (NO1	E: Registered /	Agont signature	required when reinstating) DA	IE .
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	3 AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		same	Change Addition
NAME	icije, opoliki		1.2 NAME		Seme	
STREET ADDRESS	13312 S.W. 61ST ST.		1.3 STREET ADDRESS		1571 N.W. 157 AVE	•,
CITY-ST-ZIP	IIAMI FL 33183		1.4 CiTY-S	T-ZIP	Pembroke Pines, F	1. 33028
TITLE	ST	DELETE 2.1TI			Same	Change Addition
NAME	Oltre Court		2.2 NAME		Same	
STREET ADDRESS	13312 S.W. 61ST ST.		2.3 STREE		1571 N.W. 157 Ave	33000
CITY-ST-ZIP TITLE	MIAM FL 33183		2.4 CITY-S 3.1 TITLE	T-ZIP	Pembroke Pines, Fl	
NAME	[J OLELIE		3.1 NAME			Change Addition
STREET ADDRESS			3.3 STREE	TADDRESS		
CITY-ST-ZIP			3.4 CITY-S			
TITLE	The state of the s		4.1 TITLE			Change Addition
NAME		Land December	4.2 NAME			TI CHANGE TI MONDON
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		DELETE	51 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP				r-zip		
14. I Dereby ce	erury mat the information supplied with th	us mind does not qualify for the	e exemption	nstated in s	section 119.07(3)(i), Florida Statutes. I further cer	tity that the information

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.

CICHATURE

Muia a Halo

6-30.99

R2E034 (5/98)