FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90085 033 ***150.00

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

DOCUMENT# P96000086892

1. Corporation Name

CLADVE DLACE INC

GLADIS PLACE INC.								
Principal Place	of Rusiness	Mailing Address						
2007 S.W. 8 ST. 2007 S.W. 8 ST. MIAMI FL 33135 MIAMI FL 33135						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
						10/22/1996		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For		
21 26						65-0701605 Not Applicable		
Suite, Apt. i	#. etc.	Suite, Apt. #, etc.	····			S8.75 Additional		
22		27				5. Certificate of Status Desired Fee Required		
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	· Country	Zip	Cour	ntry		8. This corporation owes the current year Intangible		
24	25	29 30				Personal Property Tax.		
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent		
-	,	_	l	81	Name	•		
PALACIOS, GLADYS 2007 S.W. 8 ST.			ŀ	82	Street A	Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33135			ŀ	83				
			ļ	84 City FL 85 Zip Code				
office or re agent. I ar	egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida. Such change was author	nzea	DV I	the corpor	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered 0 4-07-99		
SIGNATURE	Signature, typed or printer harps of registered ager	it and title if applicable. (NOTE: Reg	istered /	Agent	t signature rec	required when reinstating)		
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PVP	☐ DELETE	1.1 TITLE			Change Addition		
NAME	PALACIOS, GLADYS		1.2 NAME					
STREET ADDRESS	DDRESS 2007 S.W. 8 ST.		1.3 STF	REET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33135		1.4 CIT	Y-ST	r-zip			
TITLE	ST	☐ DELETE	2.1 TIT	LE		Change Addition		
NAME	PALACIOS, GLADYS		2.2 NA	ME	1			
STREET ADDRESS	2007 S.W. 8 ST.	1	2.3 STI	REET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33135		2. 4 Cl	TY-S	T-21P			
TITLE		☐ DELETE	3.1 TIT	LE		Change Addition		
NAME -		;	3.2 NA	ME				
STREET ADDRESS			3.3 STI	REET	ADDRESS			
CITY-ST-ZIP			3.4. CF		T-ZIP	THAT THATAN		
TITLE		☐ DELETE	4.1 TIT	LE	ł	Change Addition		
NAME			4. 2 NA	ME				
STREET ADDRESS		1	4.3 ST	REET	ADDRESS			
CITY-ST-ZIP			4.4 CIT	Y-\$T	r-zip			

CITY-ST-ZIP 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.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

πLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

D NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

14-07-9

Daytime Phone #

Change

Change

☐ Addition

☐ Addition