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

**PROFIT** CORPORATION ' ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000046437 (4)

GLC SERVICES, INC.

## **FILED** May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								- I I COLUMN AIR INAN INAN ABAN DENY DONA DENY DIN DIN DIN DIN DIN DIN IND NATURAL DIN IND NATURA DIN IND NATURA DIN IND NATURAL DIN IND NATURA DIND NATURA DIN IND NATURA DIN IND NATURA DIN IND NATURA DIN IND NA				
4827 OCEAN ST. MAYPORT FL 32233					4627 OCEAN ST. MAYPORT FL 32233					DO NOT WRITE IN THIS SPACE		
										3. Date Incorporated or Qualified 05/23/1997		
2. Principal F	lace of Busin		2a	2a. Mailing Address					4. FEI Number Applied For			
21 5261 SW 10 ST					26 5261 SW 10 ST					Not Applicable		
Suite, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State					City & State					6. Election Campaign Financing \$5.00 May Be		
23 PLANTATION, FL					28 PLANTATION, FL					Trust Fund Contribution Added to Fees		
Zip 24 333	317 Country USA 2				Zip Zip Country USA				5 <i>A</i>	8. This corporation owes or has paid the current year Intangliele Personal Property Tax due June 30. Yes No		
9, Name and Address of Current Registered Agent										10. Name and Address of New Registered Agent		
AMILAD ALPCOT C ID 81 Name												
4007 ACEAN CT									ess (P.O. Box Number is Not Acceptable)			
NAYPORT FL 32233									26			
'								83				
								<b>84</b> City	, .	. 85 Zip Code		
									PLANTATION FL 33317			
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 reactive gent, or both, in the State of Elorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Limit amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE  Signature Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  OATE												
12.		/	OFFICERS AN				13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE					L.	DELETE	1.1 T(	LE	P	☐ Change ☐ Addition		
NAME							1.2 N/	ME		ERALD CHERAMY		
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report or jupplied with this right does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify hat the information of jupplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path, that I am an corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in transport or on an attack them with an address. indicated on this annual report or officer or director of the corporate