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 # P9700068580

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90092 048 ***150.00

1. Corporation		UUOU	OU -								
GLAUST	ONE'S INC.		•					 	181 48 181 34 18 1	114 21 (112 1 111 8 1	1 8 131 88 11 1 88 1
Principal Place of Business Mailing Address						_		T (BANKANI III INIK INDIN DOMIN DO	ili ba lili es ti u	Milms cacat astal	facts and that
11338 BISCAYNE BLVD. 11338 BISCAYNE BLVD.											
N. MIAMI FL 33181 N. MIAMI FL 33181								DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualifed			
								08/07/1997			
2. 'Principal Pl	ace of Business	2a. Mail	2a. Mailing Address					"			plied For
21 4		26						05 0112000			t Applicable
Suite, Apt.	#retc.		Suite, Apt. #, etc.					5. Certifcate of Status Desired		\$8.757 Fee Re	Additional
.City & State			City & State					a Floction Compaign Financing \$5.00 May Re			
23	3	28						Trust Fund Contribution Added to Fees			
Zip	Country	Zip				y		8. This corporation owes the current year Intangible			
24	25	29 30						Personal Property Tax.		Yes	□No
	9. Name and Address of Currer	ıt Registered	l Agent					10. Name and Address of New I	Registered	Agent	
					81	Name					\
PHILLIPS, KATHLEEN 11338 BISCAYNE BLVD.					82 Street Addre			ss (P.O. Box Number is Not Accept	able)		
	IAMI FL 33181		}								
14. 191	Part 12 30101				83						
					84 City				FL		Code
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.15	08, Florida Statut	es, the a	bove	-named o	corpoi	ration submits this statement for the	purpose o	f changing its	registered
agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	ations of, Sect	tion 607.0505, Flo	rida Stati	utes.	ine corpo	ration	TS Dogita of directors. I fileleby acce	pr ino appo	m more do vo	,grotor ou
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applic	able. (NOTE	: Registered	Agent	t signature re	quired v	when reinstating)	DATE		
12.	OFFICERS AN			13.				DDITIONS/CHANGES TO OF	FICERS A		
TITLE	PD DELETE			1.1 77	1.1 TITLE [1]		ΥÌ	$\triangleright D$ ρ_{MM}	1	Change	Addition
NAME	PHILLIPS, ANDREW			1.2 NA	1.2 NAME 64			LANSTON & Pahil	20	4	/ ,
STREET ADDRESS	9780 NE 13TH AVE.			1.3 ST	1.3 STREET ADDRESS			Mistons Phil	BLY	33/11	
CITY-ST-ZIP				_	TY-ST	-ZIP	<u>Λ.</u>	MIAMI - FC		Change	Addition
TITLE	D	<i>T</i> 1						·		L_ Criange	
NAME	THEE O, WITHE			2.2 NA							
: STREET ADDRESS	9800 NE 13TH AVE				2.4 CITY-ST-ZIP						
CITY-ST-ZIP TITLE	N. MIAMI FL 33138		[] DELETE	3.1 17		1-217				Change	Addition
NAME	•		_	3.2 NA				·			
STREET ADDRESS	•			ı		ADDRESS					
CITY-ST-ZIP					ITY-S	1					
TITLE			☐ DELETE	4.1 TT	ΓLE					Change	☐ Addition
NAME				4.2 N	AME	1					
STREET ADDRESS				4.3 \$1	REET	ADDRESS					
CITY-\$T-ZIP				4.4 CI	TY-ST	-ZIP				= 1.0	
TITLE			☐ DELETE	5.1 TT		}				Change	☐ Addition
NAME				5.2 N/		4000					1
STREET ADDRESS						ADDRESS					}
CITY-ST-ZIP	<u> </u>		DELETE	5,4 CI 6,1 TI	TY-ST	-211				Change	Addition
TITLE			□ here ie	6.2 N/			•			C., Snange	
NAME expect Append				1		ADDRESS					
STREET ADDRESS					TY-ST	1					
ON I - O I - EUF											

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 of supplier ental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the exemption of the corporation or the exemption of the corporation of the preserved to execute this report as required by Chapter 697. 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

363/884-707 Daytime Phone*#