


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

FILED

Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000069280 (0) 1. Corporation Name GLISKO ENTERPRISES, INC.					
Principal Place of Business 325 10TH ST WEST PALM BEACH FL 33401			Mailing Address 325 10TH ST WEST PALM BEACH FL 33401		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country			2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		
g. Name and Address of Current Registered Agent STUPARITZ, ALAN D 900 E ATLANTIC BLVD SUITE 17 POMPANO BEACH FL 33060			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code		
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 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. I am familiar 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) DATE _____					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	GLISMANN, MICHAEL	1.1 TITLE		
NAME	GLISMANN, MICHAEL		1.2 NAME		
STREET ADDRESS	325 10TH ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33401		1.4 CITY-ST-ZIP		
TITLE	DV	KOLAR, JAMES	2.1 TITLE		
NAME	KOLAR, JAMES		2.2 NAME		
STREET ADDRESS	325 10TH ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33401		2.4 CITY-ST-ZIP		
TITLE	DS	GLISMANN, ANITA	3.1 TITLE		
NAME	GLISMANN, ANITA		3.2 NAME		
STREET ADDRESS	325 10TH ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33401		3.4 CITY-ST-ZIP		
TITLE			4.1 TITLE		
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE			5.1 TITLE		
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE			6.1 TITLE		
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/11/1997

4. FEI Number

65-0772707

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☐ No

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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TITLE			5.1 TITLE		
NAME			5.2 NAME		
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TITLE			6.1 TITLE		
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 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)(f), 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.

SIGNATURE: *Anita Glismann* REQUIRED

1-16-98 561-820 0016