## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000007674

Address:

City-St-Zip:

12911 SW 148 TERR RD

MIAMI, FL 33186

Entity Name: G.L. SYSTEMS CORPORATION

FILED Jun 04, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
13071 SW 122ND AVE. MIAMI, FL 33186			12911 SW 148 TERR MIAMI, FL 33186	12911 SW 148 TERRACE ROAD MIAMI, FL 33186	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
13071 SW 122ND AVE. MIAMI, FL 33186			12911 SW 148 TERR MIAMI, FL 33186	12911 SW 148 TERRACE ROAD MIAMI, FL 33186	
FEI Number	: 65-0807824	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
12911 SW MIAMI, FL					
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CEO (X) LEWIS, ROBER 11375 SW 75 T OCALA, FL 344	ERR RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P () AMADOR, CES/ 12911 SW 148 MIAMI, FL 3318	TERR RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	VP () AMADOR, BREI	Delete NDA A	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: CESAR A. AMADOR P 06/04/2008