2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P99000078088 **DOCUMENT #**

1. Entity Name
DIANNE L. GLEMBOCKI, P.A.



FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90715 037 ***150.00

PORT RICHEY F. 34688 2. Principal Place of Business Suite. Apt. F. otc. Suite. Apt. F. otc. City & State City & State Desired Strout Address of Number is Not Acceptable) City FL Additional Fee Required City & State Desired												
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S. Name and Address of Current Registered Agent GLEMBOCKI, DIANNE L City City FL Zip Code City City FL Zip Code City	City & Stat	de	City & State				4 . F	4. FEI Number 59-3450593		ļ		
GLEMBOCKI, DIANNE L 7224 KING ARTHUR DRIVE PORT RICKEY FL 34668 City FL Zip Code C	Zip	Country	Zip		Country		5. C	Certificate of Status Desired		\$8.75 Ad	lditional ed	
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Street Address (P.O. Box Number is Not Acceptable)					Name	Name `						
Signature, tried or protect name of entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent and text application. Fill Now!!! FEE IS \$150.00					Street A	ddress (I	P.O. Bo	ox Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·		
B. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Positive for positive ag	PORT RIC	HEY FL 34668										
SIGNATURE Signature, speed or printed name of registered agent and little 4 applicable (NOTE Registered Agent expression required when revolation) DATE					City			-	FL	Zip Cod	e	
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		ertify that the information supplied with	n this filing	does not qualify for the		ted in Sor	ction 1	19 07(3)(i) Florida Statutes I	further co	rtify that the	Information	

indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.