

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # S39420

1. Entity Name
GLORIA C. JACOB DESIGNS INTERNATIONAL, INC.



FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90001 025 ***150.00

Principal Place of Business
170 LAS BRISAS CIRCLE
HYPOLUXO, FL 33462

Mailing Address
170 LAS BRISAS CIRCLE
HYPOLUXO, FL 33462



01232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0248763

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JACOB, GLORIA C.
11843 S.W. 79TH TERR
MIAMI, FL 33183

170 LAS BRISAS Circle
Hypoluxo - FL.
33462

**DO NOT WRITE
IN THIS SPACE**

8. The above named 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.

SIGNATURE

Gloria C. Jacob, President

(NOTE: Registered Agent signature required when reinstating)

DATE

3-2-04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME JACOB, GLORIA C.
STREET ADDRESS 170 LAS BRISAS CIRCLE
CITY-ST-ZIP HYPOLUXO, FL 33462

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IN THIS SPACE**

12. 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-2-04 561 582 6909

Date

Daytime Phone #