


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90393 022 \*\*\*150.00

<b>DOCUMENT # S57564</b> 1. Entity Name <b>GLANAMARAL CORP.</b>					
Principal Place of Business <b>8190 NW 66 ST</b> <b>MIAMI, FL 33166</b>			Mailing Address <b>8190 NW 66 ST</b> <b>MIAMI, FL 33166</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>65-0301672</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> <b>VALDES, FRANCISCO</b> <b>8190 NW 66 STREET</b> <b>MIAMI, FL 33166</b>				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>BUSTAMANTE, ALBERTO E</b> <b>8190 NW 66 ST</b> <b>MIAMI, FL 33166</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P, D</b> <b>Galdo, Darlene</b> <b>Two Alhambra Plaza, PH 1B</b> <b>Coral Gables, FL 33134</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>BUSTAMANTE, ALBERTO J</b> <b>8190 NW 66 ST</b> <b>MIAMI, FL 33166</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>Murai, Rene V.</b> <b>Two Alhambra Plaza, PH 1B</b> <b>Coral Gables, FL 33134</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TAS</b> <b>BUSTAMANTE DE LOPEZ, MARIA A</b> <b>8190 NW 66 ST</b> <b>MIAMI, FL 33166</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPS</b> <b>BUSTAMANTE, ANA L</b> <b>8190 NW 66 ST</b> <b>MIAMI, FL 33166</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AT</b> <b>BUSTAMANTE DE DUNN, GLADYS M</b> <b>8190 NW 66 ST</b> <b>MIAMI, FL 33166</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 I, co, empowered.					
<b>SIGNATURE:</b> _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>Darlene Galdo, President</b>			Date <b>4/25/08</b> Daytime Phone # <b>(305) 444-0101</b>		

40086300



04252008 Chg-P CR2E034 (12/06)

FL

Zip Code