

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V08189

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: GLADES PETROLEUM ENTERPRISES, INC.

**Current Principal Place of Business:**

GLADES ROAD CHEVRON  
690 GLADES ROAD  
BOCA RATON, FL 33431 US

**New Principal Place of Business:**

**Current Mailing Address:**

7597 LA CORNICHE CIRCLE  
BOCA RATON, FL 33433 US

**New Mailing Address:**

FEI Number: 65-0306440      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POMERANCE P.A., ROGER  
1900 NW CORPORATE BLVD  
SUITE 201E  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: TALBOTT, GREGORY  
Address: 541 KAY TERRACE  
City-St-Zip: BOCA RATON, FL

Title: V ( ) Delete  
Name: KLEOPA, KLEOPAS  
Address: 7597 LA CORNICHE CIR  
City-St-Zip: BOCA RATON, FL

Title: STD ( ) Delete  
Name: KLEOPA, ANDREA  
Address: 7597 LA CORNICHE CIR  
City-St-Zip: BOCA RATON, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: ANDREA KLEOPA

STD

01/08/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date