

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 236959

FILED  
Jan 18, 2012  
Secretary of State

**Entity Name:** CAPITAL GLASS SPECIALTIES INC.

**Current Principal Place of Business:**

3430 CYPRESS STREET  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

3430 CYPRESS STREET  
TAMPA, FL 33607

**New Mailing Address:**

FEI Number: 59-0906305

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LINO BENNIE M., JR.  
3430 CYPRESS STREET  
TAMPA, FL 33607 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LINO, BENNIE M.,JR  
Address: 117 S. FREMONT STREET  
City-St-Zip: TAMPA, FL

Title: VD  
Name: LINO, BENNIE S  
Address: 121 S. FREMONT STREET  
City-St-Zip: TAMPA, FL

Title: STD  
Name: LINO, CATHERINE  
Address: 121 S. FREMONT STREET  
City-St-Zip: TAMPA, FL

I hereby 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 all other like empowered.

SIGNATURE: CATHERINE LINO

VD

01/18/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date