

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

95 MAY -1 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 240734 (4)

1. Corporation Name
DOETSCH'S GLASS & ALUMINUM CO., INC.

Principal Place of Business 1729 N. POWERLINE RD. POMPANO BCH FL 33069	Mailing Address 1729 N. POWERLINE RD. POMPANO BCH FL 33069
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2. Other Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/30/1960	3a. Date of Last Report 05/01/1994
21	26	4. FEI Number 59-0910574		Applied For Not Applicable	
22	27	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	28	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	25	29	30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BCH FL 33069		10. Name and Address of New Registered Agent 81 Name Welborn, Hugh 82 Street Address (P.O. Box Number is Not Applicable) 1729 N. Powerline Road 83 84 City Pompano Beach FL 85 Zip Code 33069	
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11. I, the undersigned, certify that the provisions of Sections 607.01(2)(b) and 607.15(1)(b), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the address indicated below. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a resident of the State of Florida and accept the duties of a registered agent under Chapter 607, Florida Statutes.

SIGNATURE: *Hugh Welborn* 2-10-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME DC LITTLE, IRENE 1729 N. POWERLINE RD. POMPANO BEACH FL	1. NAME DC LITTLE, IRENE 1729 N. POWERLINE RD. POMPANO BEACH FL	1. NAME DC LITTLE, IRENE 1729 N. POWERLINE RD. POMPANO BEACH FL	☐ Change ☐ Addition
NAME DPS WELBORN, HUGH 1729 N. POWERLINE RD. POMPANO BEACH FL	2. NAME DPS WELBORN, HUGH 1729 N. POWERLINE RD. POMPANO BEACH FL	2. NAME DPS WELBORN, HUGH 1729 N. POWERLINE RD. POMPANO BEACH FL	☐ Change ☒ Addition
NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	3. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	3. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	☐ Change ☐ Addition
NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	4. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	4. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	☐ Change ☐ Addition
NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	5. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	5. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	☐ Change ☐ Addition
NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	6. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	6. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	☐ Change ☐ Addition
NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	7. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	7. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	☐ Change ☐ Addition
NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	8. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	8. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	☐ Change ☐ Addition
NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	9. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	9. NAME DVT HORTA, RAFAEL 1729 N. POWERLINE RD. POMPANO BEACH FL	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 607.01(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. That I am eligible to be elected to the corporation or the receiver or trustee empowered to receive this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, of Block 13 of this report or on an attachment with an address.

SIGNATURE: *Hugh Welborn* 2-10-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR