

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 16, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # J63890  
 1. Entity Name  
 ART GLASS ENVIRONMENTS INC.



Principal Place of Business  
 440 SE 5TH AVE.  
 DELRAY BEACH, FL 33483-5211 US

Mailing Address  
 4550 MCKNIGHT ROAD  
 SUITE 208  
 PITTSBURGH, PA 15237 US

**DO NOT WRITE IN THIS SPACE**



03052006 No Chg-P CR2E034 (11/05)

4. FEI Number  
 59-2828470

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KLUG, WILLIAM L.  
 440 SE 5TH AVE.  
 DELRAY BEACH, FL 33483-5211

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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD KLUG, WILLIAM L. 440 SE 5TH AVE. DELRAY BEACH, FL 334835211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

UQU000470129  
 03/28/06-80001-013 158.75

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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, changed, or on an attachment with an address, with all other, like empowered.

SIGNATURE: William L. Klug 3/11/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #