

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L70355

FILED
Apr 25, 2005
Secretary of State

Entity Name: ALL PHASE GLASS AND MIRROR COMPANY, INC.

Current Principal Place of Business:

4203 N LAUBERWAY
#7
TAMPA, FL 33614 US

New Principal Place of Business:

Current Mailing Address:

4203 N LAUBERWAY
#7
TAMPA, FL 33614 US

New Mailing Address:

FEI Number: 59-3009685 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, KRISTIE L
19259 PHILIPS ROAD
MASARYKTOWN, FL 32604 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: VP (X) Delete
Name: HALL, JAMES O.
Address: 8207 PINEHURST CIRCLE
City-St-Zip: TAMPA, FL 33615

Title: VP (X) Delete
Name: HALL, COLLEEN M.
Address: 8207 PINEHURST CR
City-St-Zip: TAMPA, FL 33615

Title: P () Delete
Name: HALL, II, JAMES O
Address: 19259 PHILIPS ROAD
City-St-Zip: MASARYKTOWN, FL 34604

Title: ST () Delete
Name: HALL, KRISTIE LYNN
Address: 19259 PHILIPS ROAD
City-St-Zip: MASARYKTOWN, FL 34604

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES O. HALL II

P

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date