

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90029 003 ***150.00

DOCUMENT # P02000021182

1. Entity Name

A-1 GLASS WORKS, INC.



Principal Place of Business

7526A MCELVEY
PANAMA CITY BEACH FL 32407

Mailing Address

2905 LAURIE AVENUE
PANAMA CITY BEACH FL 32408

2. Principal Place of Business

125 GWYN DRIVE

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 19196

Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/04)

City & State

PANAMA CITY BEACH

City & State

PANAMA CITY BEACH

4. FEI Number

30-0048664

Applied For

Not Applicable

Zip

FLORIDA
32408

Country

BAY

Zip

FLORIDA
32417

Country

BAY

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLESC, RONALD
2905 LAURIE AVENUE
PANAMA CITY BEACH FL 32408

7. Name and Address of New Registered Agent

Name RONALD FLESC

Street Address (P.O. Box Number is Not Acceptable)

125 GWYN DRIVE

PANAMA CITY BEACH

City

FL

Zip Code

32408

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 RONALD FLESC

Signature, typed or printed name of registered agent and title if applicable

Ronald Flesch

(NOTE: Registered Agent signature required when reinstating)

02-08-2005

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTD ☐ Delete
NAME FLESC, RONALD
STREET ADDRESS 2905 LAURIE AVENUE
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronald Flesch RONALD FLESC

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-08-2005

Date

Daytime Phone #