


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90074 045 ***150.00

DOCUMENT # P02000113034

1. Entity Name
AMERICAN GLASS LAMINATES, INCORPORATED




Principal Place of Business
901 NW 35th St, Suite 200
4800 N FEDERAL HIGHWAY SUITE 307B
BOCA RATON, FL 33431

Mailing Address
4800 N FEDERAL HIGHWAY SUITE 307B
BOCA RATON, FL 33431
901 NW 35th St, Suite 200

DO NOT WRITE IN THIS SPACE

40075430



01242007 No Chg-P CR2E034 (11/05)

4. FEI Number 22-3892506	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAP SERVICE CORPORATION
4800 N FEDERAL HIGHWAY SUITE 307B
BOCA RATON, FL 33431

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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	PSD DOYLE, JOHN 4800 N FEDERAL HIGHWAY SUITE 307B BOCA RATON, FL 33431
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DO NOT WRITE IN THIS SPACE

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

SIGNATURE: John V. Doyle **3/14/07** **561-730-2300**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #