2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 14, 2008 08:00 A Secretary of State DOCUMENT.#-P03000041537 1. Entity Name GLASS DESIGN & CUSTOM MADE, INC. Principal Place of Business Mailing Address 6770 INDIAN CREEK DR APT 4D 6770 INDIAN CREEK DR APT 4D MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141 04092008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 43-2010239 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GEREZ, EDMUNDO M DO NOT WRITE 6770 INDIAN CREEK DR APT 4D MIAMI BEACH, FL 33141 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE GEREZ, EDMUNDO M NAME STREET ADDRESS 6770 INDIAN CREEK DR APT 4D CITY-ST-ZIP MIAMI BEACH, FL 33141 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this find 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.

like empowered.

RIRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: