

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Mar 24 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000086263 (9)

1. Corporation Name  
DEW GLASS, INC.



Principal Place of Business

Mailing Address

643 W MICHIGAN ST  
ORLANDO FL 32805

643 W MICHIGAN ST  
ORLANDO FL 32805-6203

3. Date Incorporated or Qualified  
12/13/1993

3a. Date of Last Report  
02/06/1996

2. Principal Place of Business

2a. Mailing Address

21 5667 Commerce Drive  
Suite, Apt. #, etc

26 5667 Commerce Drive  
Suite, Apt. #, etc

4. FEI Number  
59-3215799

Applied For  
Not Applicable

22 #1  
City & State

27 #1  
City & State

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

23 Orlando, Fl.  
Zip Country

28 Orlando, Fl.  
Zip Country

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

24 32839

25 Orange

29 32839

30 Orange

8. This corporation has liability for intangible tax under s 199 032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DRAGE, THOMAS B JR.  
120 S ORANGE AVE  
ORLANDO FL 32802

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature type (corporation name of registered agent) if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DEW, MARK H	
STREET ADDRESS	643 W MICHIGAN ST	
CITY, ST, ZIP	ORLANDO FL 32805	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	HOOKE, DOUGLAS P	
STREET ADDRESS	643 W MICHIGAN ST	
CITY, ST, ZIP	ORLANDO FL 32805	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	5667 Commerce Drive #1
1.4 CITY-ST-ZIP	Orlando, Fl. 32839
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	5667 Commerce Drive, #1
2.4 CITY-ST-ZIP	Orlando, Fl. 32839
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mark H. Dew  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-19-97 407-855-8264  
Date Daytime Phone #

CR2E034 (9/96)