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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000032905 (9)

GLASSWALL, INC.

Principal Place of Business

12041 SW 110 ST CIR SOUTH MIAMI FL 33186 US

Mailing Address

12041 SW 110 ST CIR SOUTH MIAMI FL 33186-3829

FILED Mar 06 1997 8:00am Secretary of State



						3. Date Incorporated or Qualified							
2. Principal Pl 21 1876	ace of Business Kennedy Cswy	26. Mailing Address . W	1108	37.	.Cie.	. Q	4. FEI Number 65-0489307			- +	Applied For Not Applicable		
Suric, Apt. #, etc Suite, Apt. #, etc. 27							5. Certificate of Status Desir	ed			Additional Required		
City & State	City & State City & State						Election Campaign Financing \$5.00 Ma Trust Fund Contribution Added to F			- 7			
Z(P) 33/	141 25 DIF DE .	29 33186	Count		DE		8. This corporation has liabil Florida Statutes		tangible Yes	tax under	s. 199.032,		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent							
MOUSSA, SAMIR						81 Name							
MIAMI FL 33186					82 Street Address (P.O. Box Number is Not Acceptable)								
					83								
			8	34	City	····			FL	85 Zi	p 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE													
	Starter is a type dilor printed trame of registered agent			Agen	l signature red	equired w	vhen reinstating)		DATE				
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO	OFFICE	RS AND	_			
1111.6				1.1 TITLE						L. Change	Addition		
NAME	MOUSSA, SAMIR G			1.2 NAME							=		
STREET ADDRESS				1.3 STREET ADDRESS									
CHTY-ST-ZIP	The state of the s			1.4 CITY - ST - ZIP			 				T A direct		
TITLE	V DELETE			2.1 TITLE						Change	e 🔲 Addition		
NAME	BROOMHALL, JAMES R			2.2 NAME									
STREET ADDRESS				23 STREET ADDRESS									
CITY-ST-ZIP				2 4 CITY-ST-ZIP									
147.0	☐ DELETE 31			31 TITLE						L] Change	Addition		
NAME	3			3.2 NAME							-		
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NAME			4. 2 NA	ME									
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NAME			6.2 NAM	AE.							ļ		
STREET ADDRESS			6.3 STRI	EET A	ADDRESS								
CITY - ST - ZIP			6.4 CITY		l l								
L-2-1													

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

305-861-1331